## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000068978 (1)

FRANE MLINAR INC.

Principal Place of Business

13900 EXOTICA LANE

Mailing Address

13900 EXOTICA LANE

## **FILED** Apr 16 1997 8:00am Secretary of State



| WELLINGTON (  | FL 83414  | WELLINGTON FL 33414-8181   |   |   |   |                        |                     |                                   |
|---|---|--|---|---|---|------------------------|---------------------|-----------------------------------|
| <b>.</b>  |   |  |   |   | 3. Date Incorporated or Qualified 08/19/1996  | 3a. Da                 | ite of Las          | t Report                          |
|   | lace of Business  | 2a. Mailing Address  |   |   | 4. FEI Number 65~0696530  |                        |                     | Applied For                       |
|   | O EXOTICA JANG  | 26 13900 EXOT  | ICA o                                   | LANG  | 65-0676530  |                        |                     | Not Applicable                    |
| Sulte, Apt.   |   | Suite, Ap1. #, etc.  |   |   | 5. Certificate of Status Desired  |                        |                     | 5 Additional<br>Required          |
| City & State City & State  23 WELLINGTON, FLORIDA 28 WELLINGTON |   |  |   | CORIDI  | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees  |                        |                     |                                   |
| Zip<br>837  | 114 25 USA  | 29 33414 3   | Country                                 | SA  | 8. This corporation has liability for in  | ntangible<br>Yes       |                     | er s. 199.032,                    |
|   | g. Name and Address of Current  | Registered Agent   |   |   | 10. Name and Address of New Reg   | gistered /             | Agent               |                                   |
|   | NAR, FRANE  |  | 81                                      | Name  |   |                        |                     |                                   |
| 13900 EXOTICA LANE  |   |  |   | 82 Street Address (P.O. Box Number is Not Acceptable) |   |                        |                     |                                   |
| WEL   | LINGTON FL 33414  |  |   |   |   |                        |                     |                                   |
| . •   |   |  | 83                                      |   |   |                        |                     |                                   |
|   |   |  | 84                                      | City  | 4   | FL                     |                     | ip Code                           |
| 11. Pursuant office or reagent. I a                             | to the provisions of Sections 607.0502<br>egistered agent, or both, in the State of<br>m familiar with, and accept the obliga | and 607.1508, Florida Statutes,<br>of Florida. Such change was aut<br>tions of, Section 607.0505, Florid | , the abov<br>thorized by<br>da Statute | e-named corp<br>y the corpora<br>s.                   | poration submits this statement for the pution's board of directors. I hereby accep | urpose of<br>t the app | changin<br>ointment | g its registered<br>as registered |
| SIGNATURE   | Signature, typed or printed name of registered agen   | Land titic if applicable (NOTE: F  | Registered Ag                           | ont signature requi                                   | ired when reinstating)  | DATE                   |                     | ·····                             |
| 12.   | OFFICERS AND  |  | 13.                                     |   | ADDITIONS/CHANGES TO OFFIC  | ERS AND                |                     |                                   |
| TITLE   | D FRANK   | ☐ DELETE   | 1.1 TITLE                               |   |   |                        | Chang               | ge Addition                       |
| NAME .  | MLINAR, FRANE   |  | 1.2 NAME                                |   |   |                        |                     |                                   |
| STREET ADDRESS  | 13900 EXOTICA LANE  |  | 1.3 STREET                              |   |   |                        |                     |                                   |
| CITY-ST-ZIP   | WELLINGTON FL 33414   | ☐ DELETE   | 1.4 CITY - S                            | ST - ZIP  |   |                        | Chanc               | ne Addition                       |
| TITLE   |   | ☐ DETEUE   | 2.1 THLE                                |   |   |                        | III chant           | le 🗀 Vooison                      |
| NAME  |   | •  | 2.2 NAME                                | r Apporce   |   |                        |                     |                                   |
| STREET ADDRESS  |   |  | 23 STREET                               |   |   |                        |                     |                                   |
| CITY-ST-ZIP TITLE   |   | ☐ DELET <b>E</b>   | 2 4 CITY-1<br>3 1 TITLE                 | S1-21P  |   |                        | Chang               | je Addition                       |
| NAME  |   |  | 3.2 NAME                                |   |   |                        |                     | ,,                                |
| STREET ADDRESS  |   |  | 3 3 STREET                              | LADDRESS  | ÷   |                        |                     |                                   |
| CITY-ST-ZIP   |   |  | 3.4. CITY-                              |   |   |                        |                     |                                   |
| TITLE   |   | DELETE   | 4.1 TITLE                               |   |   |                        | Chang               | ge Addition                       |
| NAME  |   |  | 4. 2 NAME                               |   |   |                        |                     |                                   |
| STREET ADDRESS  |   |  | 4.3 STREET                              | ADDRESS   |   |                        |                     |                                   |
| CITY-ST-ZIP   |   |  | 4.4 CHTY-S                              | ST - ZIP  |   |                        |                     |                                   |
| TITLE   |   | DELETE   | 5.1 TITLE                               |   |   |                        | Chang               | e 🔲 Addition                      |
| NAME  |   |  | 5.2 NAME                                |   |   |                        |                     |                                   |
| STREET ADDRESS  |   |  | 5.3 \$1REE1                             | ADDRESS   |   |                        |                     |                                   |
| CITY-ST-ZIP   |   |  | 5.4 CITY - S                            | ST- <b>2</b> IP                                       |   |                        |                     |                                   |
| TITLE   |   | DELETE   | 6.1 TITLE                               |   |   |                        | ☐ Chanç             | e 🔲 Addition                      |
| NAME  |   | ,  | 6.2 NAME                                |   |   |                        |                     |                                   |
| STREET ADDRESS  |   |  | 6.3 STREET                              | ADDRESS   |   |                        |                     |                                   |
| CITY-ST-ZIP   |   |  | 6.4 C(1Y-5                              | S1-ZIP  |   |                        |                     |                                   |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplomental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.