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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083143 (3)

WOOLY BULLY, INC.

SIGNATURE:

Principal Place of Business Mailing Address 3355 17TH STREET 3355 17TH STREET SARASOTA FL 34235 SARASOTA FL 34235-8964 3. Date Incorporated or Qualified 3a. Date of Last Report 10/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0698886 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GIBELLINA, GLEN A 3355 17TH STREET Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34235 87 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Sugarance typical or printed name of registered agent and title if applicable (NOTE: Reg stered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 11 TITLE Change X Addition THE P/S/T/D 1.2 NAME NAME Glen Gibellina STREET ADDRESS 1.3 STREET ADDRESS 3355 17th Street 1.4 CITY - ST - ZIP City-St-7F Sarasota, FL 34235-8964Change Addition DELETE 2.1 TITLE THE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-S1-ZIP City - St - 7/P DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- 2IP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 43 STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - ZIF DELETE Addition 51 TITLE THEF NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIE 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADORESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CHY-S1-76

14. Lido 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 supplemental 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 changed, or on armitischment with an address.

GLEN GIRELLINI

GLEN GIBELLINA

3/23/97

Date

9 41-955-2859

Daytime Phone #

PRESIDENT