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Jan 14 1997 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000088021 (6)

1. Corporation Name: M & A ENTERPRISES OF SOUTH FLORIDA, INC.



Principal Place of Business: 2560 N.W. 91ST AVENUE CORAL SPRINGS FL 33065
Mailing Address: 2560 N.W. 91ST AVENUE CORAL SPRINGS FL 33065-5114

3. Date Incorporated or Qualified: 10/23/1996
3a. Date of Last Report: N/A
4. FEI Number: 65-070-3255
5. Certificate of Status Desired: []
6. Election Campaign Financing Trust Fund Contribution: []
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [X] Yes [] No

2. Principal Place of Business: 21 2189 North State Road 7
22. City & State: 23 Margate, Florida
24. Zip: 33063, Country: USA

9. Name and Address of Current Registered Agent: WALSH, GERALD V, 9500 N.W. 37TH COURT, CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Signature typed or printed name of registered agent and block if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Includes entries for Thomas, Michael A and Thomas, Arlene S.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 2.1 TITLE, 2.2 NAME, 2.3 STREET ADDRESS, 2.4 CITY-ST-ZIP. Includes checkboxes for Change and Addition.

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 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 if changed, or on an attachment with an address.

SIGNATURE: Arlene S. Thomas, 1-7-97, (954) 970-4996

CR2E034 (9/96)