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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 07 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000090562 (5)

F & B ENTERPRISES, INC.

Principal Place of Business

SIGNATUF

2045 MICHIGAN ST. PETERSBUI			2045 MICHIGAN AVENUE NE ST. PETERSBURG FL 33703-3407										
							10/3	Incorporated or Qualif	ied	3a. Date	of Last R	eport	
2. Principal FI	lace of Business	2a. Mailing	2a. Mailing Address				4. FEI N		,		Ap	plied For	
21		26					37-	341530	<u></u>			t Applicable	
Suite, Apt	·	27					5. Certi	ficate of Status Desired	. []	\$8.75 Additional Fee Required		
City & State	9	City & 9	City & State					tion Campaign Financir t Fund Contribution	-	\$5.00 May Be Added to Fees			
Zip	Country	Zip					8. This	8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29	30				Florid	Florida Statutes Yes No					
	9. Name and Address of Curr	ent Registered A	gent		<u> </u>		10. Nam	e and Address of Nev	v Regis	tered A	ent .		
FRIE	DMAN, OSCAR				81	Name							
	MICHIGAN AVENUE NE				82	Street A	Address (P.O. Bo	ox Number is Not Acce	eptable)				
ST. I	PETERSBURG FL 33703				Ш								
		/			83								
	1				84	City	·····			FL	85 Zip (Code	
11 Duremont I	to the may suggest of 7 or	9031 703 bus 903	Alarida Statut	toe the el	how	namad a	corporation publ	mite this statement for	the rure		banding it	n registered	
11. Pursuant to the provisions of 5,500 and 607,1508 forida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. From similar with, and accept the appointment as registered agent. From similar with, and accept the obligations of Statutes. SIGNATURE 11. Pursuant to the provisions of 500 and 607,1508 forida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. From similar with, and accept the appointment as registered agent. From similar with, and accept the obligations of Statutes.													
	Signature, apped or postero can e of repistered a	agent and bille if applicab	E. (NOT	TE: Registere	d Age	nt signature r	required when reinstat			DATE		•••	
12.	<u>-</u>	ND DIRECTORS		13.			ADDIT	TIONS/CHANGES TO C	OFFICE				
THILE	D		☐ DELETE	1.1 (1						L	Change	Addition	
NAME	BALES, WILLIAM	•		1.2 N/									
STREET ADDRESS	2045 MICHIGAN AVENUE NE	•		1.3 \$7	TREET	ADORESS							
CITY-SI-ZIP	ST. PETERSBURG FL 33703			1.4 CITY - ST - ZIP							T 65	A -1 -000	
TITLE	DUEC CHOAN		DELETE	2.1 TI						L	Change	Addition	
NAME	BALES, SUSAN	•	i i		2.2 NAME								
STHEET ADDRESS	2045 MICHIGAN AVENUE NE ST. PETERSBURG FL 33703				2.3 STREET ADDRESS 2.4 CITY - ST - ZIP								
CITY+ST-ZIF TITLE	D		DELETE	2.4 C		ST-ZIP				т	Change	Addition	
NAME	FRIEDMAN, OSCAR			3.2 N							_ Orkingo		
STREET ADDRESS	2045 MICHIGAN AVENUE NE	:				address							
	ST. PETERSBURG FL 33703	•		1									
CITY - ST - ZIP TITLE			DELETE	4.1 Ti		ST-ZIP				ſ	Change	Addition	
NAME				4.2 N						•	- 9		
STREET ADDRESS						ADDRESS							
CITY - ST - ZIF						T-21P							
TILE			DELETE	5.1 Ti							Change	Addition	
NAME				5.2 N	AME						-		
STREET ADDRESS				5.3 S	TREET	ADDRESS							
CITY - ST - ZIF				5.4 C	ITY-S	T-ZIP							
TITLE			DELETE	6.1 TI							Change	Addition	
NAME				6.2 N	AME			•					
STREET ADDRESS			6.3 S	TAEET	ADDRESS								
CITY-S1-7IP				6.4 C	N-S	T-ZIP							
14. I do heret	by certify that the information supplied in indicated on this annual report of	lied th nis lying	does not qual	ity for ye	exe	mption sta	tated in Section	119.07(3)(i), Florida St	atutes.	further of	ertify that	the	
Lam an o	fficer or director of the corporation	of the receiver or	trustee empoy	wered to	exec exec	ute this re	eport as require	re shall have the same d by Chapter 607, Flor	ida Stat	utes; and	that my r	uer oairi; iriat name	
appears i	n Block 12 or Block 13 if changer,	or on an attachm	ent ware	24 PS4									