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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075463 (4)

E C & I ENTEDDDICEC INC

гча	J ENTENTHISES, INC.							
Principal Plac	e of Business	Mailing Address				-		
,		•						
12 FRANCIS ST 932 TRINIDAD RD COCOA BEACH FL 32931 COCOA BEACH FL 32931			1			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
						08/29/1997		
2. Principal P	lace of Business	2a. Mading Address				4. FEI Number	A	pplied For
21	- 1	26				59-3468208		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27						tequired
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Cou	ntru				to Fees
24	25	29	30	i ito y		<ol><li>This corporation owes or has paid the c Personal Property Tax due June 30.</li></ol>		itangible 
27	9. Name and Address of Curre		[30]	-		10. Name and Address of New Registered	-	
In	NGO, FRANK A			81 Nam	ie			
	FRANCIS ST			<b>82</b> Stre	-	(D.O. Bouth, select in Mat Accompanie)		
	ICOA BEACH FL 32931			62 Sire	n Addre	ess (P.Ö. Box Number is Not Acceptable)		
	OOA DEACHTE GEST			83	-			
				<b>54</b> 60			laal st	A
				84 City		Fi	<b>85</b> Zip	Code
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 607.1508, Florida Statut e of Florida. Such change was a	es, the a authorize	ove-name by the c	ed corpo orporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing i	its registered s registered
-	m tamiliar with, and accept the obig	gations of, Section 607.0505, Fig	orida Star	utes				
SIGNATURE	Signature, typed or printed name of registered ag	aent and title if ano icable (NOI	E: Realstere	Agent signa	ure requirer	d when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 T(	LE	T		Change	Addition
NAME	LONGO, FRANK A		. 1.2 N	ME	l			
STREET ADDRESS	932 TRINIDAD RD		1.3 \$1	REET ADDRES	s			
CITY-ST-ZIP	COCOA BEACH FL 32931 1.40		Y-ST-ZIP					
TITLE	D	☐ DELETE 2.1 T		LE		•	☐ Change	Addition
NAME	LONGO, GEORGIA	LONGO, GEORGIA 2.2N		ME	ľ			
STREET ADDRESS	932 TRINIDAD RD		2.3 S1	REET ADDRES	s			
CITY-ST-ZIP	COCOA BEACH FL 32931		2.4 C	TY-ST-ZIP				
TITLE		☐ DELETE	3.1 TI	LE	1		Change	☐ Addition
NAME .			3.2 N/	ME	-			
STREET ADDRESS			3.3 \$1	reet addres	ŝ			
CITY-ST-ZIP			3 4. C	TY-ST-ZIP				
TITLE		☐ DELETE	4.1 18	LĒ	İ		Change	Addition
NAME			4. 2 N	ME				
STREET ADORESS			4.3 ST	reet addres	ŝ			
CITY-ST-ZIP			4.4 CI	Y-ST-ZIP				
TITLE		☐ DELETE	5.1 TO				☐ Change	☐ Addition
NAME			5.2 NA					
STREET ADDRESS			5.3 \$1	reet addres	3			
City-St-Zip		<b></b>		Y-ST-ZIP		·	<del>-                                    </del>	
TITLE		DELETE	6.1 Ti				☐ Change	Addition
NAME			6.2 NA					
STREET ADDRESS			63.51	REET ADDRES	s I			i

14. 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 suppliemental 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.

**FILED** 

Mar 30 1998 8:00am

Secretary of State