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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000079145 (3)

E. MANDEL ENTERPRISES, INC.

Feb 12 1998 8:00am Secretary of State

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Principal Plac	e of Busines	s	Ma	iling Address			_			i intrinte lit this same anni nais anni na	## 198 19 19191 (1841 9	i de en
4551 MAINLANDS BOULEVARD 4551 MAINLANDS BOULEVARD PINELLAS PARK FL 33782 PINELLAS PARK FL 33782												
PINELLAS PA	HK FL 33/82		PII	nellas park f	L 33/0	52				DO NOT WRITE IN	THIS SPACE	
										3. Date Incorporated or Qualified		
										09/12/1997		
2. Principal P	Jace of Brisi	185 040 581		Mailing Addres		21121	- O	JIS 194	223	4. FEI Number 59-347133/		Applied For
Suite, Apt.	# elc		26	Suite, Apt. #, e					_		¢0.75	Not Applicable Additional
22	#, OK.		27	Conto, right in C						5. Certificate of Status Desired		Required
City & State			City & State						6. Election Campaign Financing	\$5.0	0 May Be	
	SLEY	CHAPEL FL		WESC	EY				_	Trust Fund Contribution	J Adder	d to Fees
Zip 24 335	4.3	Country	1	^{ጀው} 335ዓ	>	h	intry	,		8. This corporation owes or has paid the		
24 335		25 and Address of Current	29 Regist	A	<u> </u>	30	т			Personal Property Tax due June 30. 10. Name and Address of New Regist		∐ No
1.00	E. FRANCIS			ord regula			81	Name				
	_,	NDS BOULEVARD						A		EDGAR A. MAN	DEC	
		RK FL 33782					82	Sueet A		ss (P.O. Box Number is Not Acceptable) 8 8 8 G S S S MC LOV(PASS	
							83			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
]							84	City			- 85 Zig	Code
								ĹΥΙ		LEY CHAPEL		3543
11, Pursuant office or r	to the provis	ions of Sections 607.0502 aent, or both, in the State o	and 60 I Florid	17.1508, Florida a. Such chance	Statu was	tes, the a authorize	bove d by	e-named c / the corpo	orpor	ration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing e appointment s	lits registered is registered
agent la	ım familiar w				05, FI	orida Sta	tutes	3.		n's board of directors. I hereby accept th	1 . 1	
SIGNATURE	Signature, types	Topolied ranse of regestered agent	nen	براسلار المعالية		II. Étopielara	d App	not eign sture re	auized.	I when reinslating) D	<u> </u>	3
12.	alganiors, types.	OFFICERS AND			(140	13.	u Alge	an angriatore re	quito	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTO	ORS IN 12
TITLE				DELE	TE	1.1 7	TLE			9 T S.C.M	Change	Addition
NAME						1.2 N	AME		Ë	P, T, S, C, M EDVAN A. MANDEL		
STREET ADDRESS						1.3 \$	TREET	ADDRESS	5	450 COUNTY MOND S	18	
CITY-ST-ZIP								T-ZIP		WESCAY CHAPILL		
TITLE				L_J DELE	TE	211		{			Change	Addition
NAME						2.2 N						
STREET ADDRESS								ADDRESS				1
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NAME				•		3.2 N					. =	
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TITLE				DELE	TE	4.1 1	TLE				Change	Addition
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CITY-ST-ZIP		······································		Dr. r	16			T-ZIP			Change	Addition
TITLE				DELE	IŁ	5 1 TI		İ			Change	Addition
NAME CENTER ADDRESS						5.2 N.		AUDOECC				
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NAME						6.2 N					-	
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CITY-ST-ZIP						1	ITY-S	- 1				
	cortify that th	e information supplied will	this fil	ing does not di	iality f				in Se	ection 119.07(3)(i). Florida Statutes, I furth	er certify that the	e information

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 119.07(3)(f), Fibrida Statutes. Flurther certify that the information indicated on this annual report or supplied ential 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:

(413) 907-5450