


FILED

Apr 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT: 1998



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

DOCUMENT # P97000104733 (5)
1. Corporation Name
MALO'S OF PASADENA, INC.

Principal Place of Business
183 OLD OAK CIRCLE
PALM HARBOR FL 34683

Mailing Address
183 OLD OAK CIRCLE
PALM HARBOR FL 34683

2. Principal Place of Business
21 3333 PASADENA AVE
Suite, Apt. #, etc.
22
City & State
23 So. PASADENA FLA.
Zip
24 33707
Country
25 PINELLAS

2a. Mailing Address
26 3333 PASADENA AVE
Suite, Apt. #, etc.
27
City & State
28 So. PASADENA
Zip
29 33707
Country
30 PINELLAS

3. Date Incorporated or Qualified
12/12/1997

4. FEI Number
59-3482464
Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
Yes No

9. Name and Address of Current Registered Agent
BARBER, CHARLES F ESQ
1550 SOUTH HIGHLAND AVENUE
CLEARWATER FL 33756

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS
1. D MALO, DIONIS
193 OLD OAK CIRCLE
PALM HARBOR FL 34683
2. D MALO, THEODORA
193 OLD OAK CIRCLE
PALM HARBOR FL 34683
3.
4.
5.
6.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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: 3-14-88 813-363-6211 813-785-9839