

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Aug 09, 1999 8:00 am**  
**Secretary of State**

08-09-1999 90001 033 \*\*\*150.00

**PROFIT CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**1999**

**DOCUMENT # P98000086177**

1. Corporation Name

**FUN ROVERS, INC.**

Principal Place of Business

1172 SOUTH DIXIE HIGHWAY  
UNIT 507  
CORAL GABLES FL 33146-2918

Mailing Address

1172 SOUTH DIXIE HIGHWAY  
UNIT 507  
CORAL GABLES FL 33146-2918



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/08/1998**

4. FEI Number

**650868107**

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 the current year  
Intangible Personal Property.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

**AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name **Larry M. ZENOFF**

82 Street Address (P.O. Box Number is Not Acceptable)

**3054 ORANGE Street**

83

84 City **Coconut Grove**

**FL**

85 Zip Code

**33133**

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 **Larry M. ZENOFF**  
Signature, typed or printed name of registered agent and title if applicable.

**LARRY M. ZENOFF**

(NOTE: Registered Agent signature required when reinstating)

**7-30-99**  
DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **BLACKMORE, MICHAEL**

STREET ADDRESS **1172 SOUTH DIXIE HIGHWAY**

CITY-ST-ZIP **CORAL GABLES FL 33146-2918**

TITLE **STD** ☐ DELETE

NAME **ZENOFF, CHERRE L**

STREET ADDRESS **1172 SOUTH DIXIE HIGHWAY**

CITY-ST-ZIP **CORAL GABLES FL 33146-2918**

TITLE **D** ☐ DELETE

NAME **ZENOFF, LARRY M**

STREET ADDRESS **1172 SOUTH DIXIE HIGHWAY**

CITY-ST-ZIP **CORAL GABLES FL 33146-2918**

TITLE **D** ☐ DELETE

NAME **BLACKMORE, CHRISTINE M**

STREET ADDRESS **1172 SOUTH DIXIE HIGHWAY**

CITY-ST-ZIP **CORAL GABLES FL 33146-2918**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME **ST/VP/D**

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **D/P**

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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: **CHRISTINE BLACKMORE**  
Signature, typed or printed name of signing officer or director

**7-29-99** **305-538-0202**  
Date Daytime Phone #

CR2E034 (5/99)

P98000086177  
602560-9001-33

**FREEDMAN & COMPANY**

Leslie J Freedman, CPA, P.A. Certified Public Accountants and Consultants

July 30, 1999

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
PO Box 1500  
Tallahassee, Fl. 32302-1500

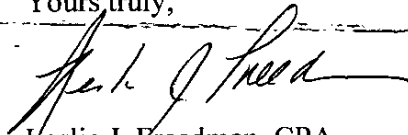
Re: Fun Rovers, Inc.  
1999 Profit Corporation Annual Report  
Document # P98000086177

Gentlemen:

We are enclosing your second request, fully executed with payment in the amount of \$150, for the above referenced annual report for our client Fun Rovers, Inc. At this time I am requesting an abatement of the penalty that could be assessed for this late filing. The corporation was formed on October 8, 1998 and my client was not aware that an annual filing would be necessary. The first notice was never received by my client and not until the second notice was received and they brought it to my office were they aware that this form would have to be filed.

Your consideration for abatement will be greatly appreciated. If you have any questions, please do not hesitate to call our office.

Yours truly,



Leslie J. Freedman, CPA