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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

S06403

(7)

THE E AND E MANAGEMENT CORP.

1116 67	AND E MANAGEMENT OC	, iii •					
Principal Place of Business		Mailing Address				IIII eta ii etai i etai etai etai etai etai	
950 EGRET CIRCLE APT 5402 DELRAY BEACH FL 33444		950 EGRET CIRCLE APT 5402 DELRAY BEACH FL 33444-7615					
					 Date Incorporated or Qualified 10/01/1990 	3a. Date of Last Re 03/05/1996	aport .
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26	+		65-0228670	No	t Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.	27		5. Certificate of Status Desired	□ \$8.75 A Fee Re	
City & State 23	3	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	•
€ip	Pip Country Zip		Country		8. This corporation has liability for intangible tax under s. 199.032,		
24 👇	25				Florida Statutes		
· ·	g. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New F	legistered Agent	
PFL	eger, edward J. Egret Circle #5402		L			···	
	RAY BEACH FL 33444				dress (P.O. Box Number is Not Acceptable)		
			L	83 84 City		[a-1 3: 7	5-1-
						FL 85 Zip C	
agent Lar SIGNATURE	of the provisions of Sections but, or ogistored agent, or both, in the Stat in familiar with and accept the obli Signature, typed or profed manus of registered a	gations of, Section 607.0505, F	lorida Statu		progration submits this statement for the ation's board of directors. I hereby accurate when reinstating	purpose of changing its ept the appointment as	registered
12.		ND DIRECTORS	13.	Agent signature red	ADDITIONS/CHANGES TO OFF		S IN 12
TITLE	D	DELETE	1.1 1(1)	£	7.55.11.01.07.01.11.11.02.0 TO 011	Change	Addition
NAME	PFLEGER, EDWARD J		1.2 NA	AE .			
STREET ADDRESS	950 EGRET CIR #5402		1.3 STR	EET ADDRESS			
C(TY-ST-ZIP	DELRAY BEACH FL	**************************************	1.4 CIT	Y - ST - ZIP			
TITLE	_		2.1 TIT			Change	Addition
NAME	PLEGER, EILEEN		2.2 NAI				
STREET ADORESS	950 EGRET CIR #5402			EET ADDRESS			
CITY-ST-ZIP TITLE	DELRAY BEACH FL	DELETE	2. 4 CH	Y-ST-ZIP		Change	Addition
NAME			3.2 NAM			, La bronge	L.J. Addition
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE	THE RESIDENCE OF THE PARTY OF T	DELETE	4.1 T(T)	~~~~		☐ Change	Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIF			4.4 CIT	Y - ST - ZIP			
TITLE		☐ DÉLETE	5.1 ¥(T)			Change	Addition
NAME			5.2 NAM	ME			j
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		DELETE		Y - ST - ZIP		T 05	April 18:
TITLE		ר"ו הברבוב	6.1 TITI			L Change	☐ Addition
NAME STREET ADORESS			6.2 NAM				
CITY-ST-ZIP				EET ADDRESS			1
14. I do hereb	y certify that the information suppli	ed with this filing does not gua	lify for the e	Y-ST-ZIP exemption state	ed in Section 119.07(3)(i), Florida Statu	tes. I further certify that	the
information Lam an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empo	true and at wered to ex	ccurate and th	at my signature shall have the same legor as required by Chapter 607, Florida	oal effect as if made und	der oath: that l