

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S12451

(8)

1. Corporation Name

YOUNG ENTERPRISES, INC.

Principal Place of Business

P.O. BOX 2223
FLOLER BEACH FL 32136

Mailing Address

P.O. BOX 2223
FLOLER BEACH FL 32136

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



2. Principal Place of Business		3a. Date of Last Report	
21 Suite, Apt. #, etc.		08/12/1996	
22 City & State		3b. Certificate of Status Desired	
23 Zip		5. Certificate of Status Desired	
24 Country		6. Election Campaign Financing	
		Trust Fund Contribution	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
		Yes No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
YOUNG, MAURICE		81 Name	
3631 NORTHWEST 7TH COURT		82 Street Address (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33311		83	
		84 City	
		FL 85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	
NAME	YOUNG, MAURICE	1.2 NAME	
STREET ADDRESS	3631 N.W. 7TH COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	
NAME	YOUNG, MAURICE	2.2 NAME	
STREET ADDRESS	3631 N.W. 7TH COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *Maurice Young - President*

CR2E034 (9/96)