FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996	AMMO	AL	HEF	'O
	1	19	96	

S19617

DOCUMENT # \$19617 1. Corporation Name F & P ENTERPRISES, INC. Principal Place of Business 6617 GOVERNORS DR NEW PORT RICHEY FL 34655 Mailing Address 6617 GOVERNORS DR NEW PORT RICHEY FL 34655										
		NEW FURT MURET	FL 34655		3. Date Incorporated or Qualifie	<u></u>				
• 0					12/17/1990	1	ate of Last I 04/27/1 9			
2. Principal PI	lace of Business	2a. Mailing Address		4. FEI Number		Applied For				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-3044499	·····		Not Applicable		
22		27	- F1 '		5. Certificate of Status Desired		-	5 Additional Required		
City & State	e	City & State	City & State		6. Election Campaign Financing		\$5.00 May Bo			
23 Zip	Country	28			Trust Fund Contribution		Adde	ed to Fees		
24	25 /	Zip 29	Coun 30	try:	8. This corporation has liability for	or intangible	tax under s	199.032,		
	9. Name and Address of Curre				Florida Statutes Y 10. Name and Address of New		d Anna-1			
			8	1 Name	10, 144110 BITO MUDICOS OI NEW	riegistere	u Agent			
	O, PAULINE			2 Street Addi	/D O Do N	·				
	Overnors dr		ľ	Street Acci	ress (P.O. Box Number is Not Accept	abie)				
NEW PO	ORT RICHEY FL 34655		8	3						
	•		a	4 City			11 -			
11 Purcuant t	to the provisions of Cost Co. or or			1 '		F		ip Code		
SIGNATURE	to the provisions of Sections 607,050/ ed agent, or both, in the State of Flori th, and accept the obligations of, Sec Signated types of providing the Layer		iffe Bujerera A	rent Signal in requires	d when reinstating	LIATE		·		
TITLE	PT	DELETE	13.	;	ADDITIONS/CHANGES TO OF	FICLES AN				
NAME	BIFULCO, PAULINE		1 1 Tifu 12 NAM				Change	Addition		
STREET ADDRESS	6617 GOVERNORS DR.			ET ADDRESS						
CITY-ST-ZIP	NEW PORT RICHEY FL		133116							
TITLE	VS	DELETE	2 1 1/1/16				Change	Addition		
NAME	BIFULCO, FRANK		2.2 NAM6	:			Change			
STREET ADDRESS	6617 GOVERNORS DR.		2.3 STRF	FT ADDRESS						
CITY-ST-ZIP	NEW PORT RICHEY FL		2.4 CHY	ST ZIP						
TITLE		DELETE	3 1 7 11.8				Change	Addition		
NAME			3.2 NAME	:						
STREET ADDRESS			33 STRE	E! AUDRESS						
CITY - ST - ZIP TITLE		FI oc. ere	3.4 CHTY -							
NAME		DEL ETE	4 1 11 TLE	!			Change	Addition		
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STREET ADDRESS				LADDRESS						
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TITLE		[] DELETE	6 1 TIFLE	J. 211			Change	☐ Addition		
AME			6.2 NAME			ı	onange	Addition		
STREET ADDRESS				T ADDRESS						
CHTY - ST - ZIP			6.4 CiTY-1	1						

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 logal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address SIGNATURE: Pauline Bifulo PAULINE BIFULCO 4/20/96 P13-372-8909