SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

S80115

(6)

MONDELL & ASSOCIATES, INC.			3 1880/1818 (81 (86)) 83/01 (868) 8788 (87	HÀ BARN BION SION BIRN BARN BIRN IOD
Principal Place of Business	Mailing Address			
1999 NW 70 LANE MARGATE FL 33063	1999 NW 70 LANE MARGATE FL 33063		3. Date Incorporated or Qualified	3a, Date of Last Report
			09/12/1991	06/14/1995
2. Principal Place of Business	2a, Mailing Address	, 1	4. FEI Number	Applied For
21 7891 W Sample ROAD	26 7891 W SA	mple Roas	65-0288831	Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc	•	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		O. Starting Committee Singuistics	
23 CORALSPRINGS F1.	28 CERAL SPR	rings fl.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 3 306 5 25 U.S.	29 33065	Country 5.	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes [] No
9. Name and Address of Curre	····	1001	10. Name and Address of New Re	
	¥	81 Name		
MONDELLI, JOSEPH V. 4314 NW 70TH LANE		82 Street Ad	Idress (P.O. Box Number is Not Acceptab	<u></u>
CORAL SPRINGS FL		July Silver Ad	ioreas (1.0. box Hamber is Hot Acceptate	,
CONL STRINGS FL		83		
		84 City		85 Zip Code
				FL
 Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig 	e of Florida. Such change was a	authorized by the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept	irpose of changing its registered the appointment as registered
SIGNATURE				
Stgnature, typed or printed name of registered as		TE Registered Agent signature rec		DATE
	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
THE P		1.2 NAME		
NAME MONDELLI, JOSEPH V. STREET ADDRESS 4314 NW 70TH LANE		1 3 STREET ADDRESS		
STREET ADDRESS 4314 NW 70TH LANE CHY-SI-ZIP CORAL SPRINGS FL		1 4 CITY - ST - ZIP		
TITLE	DELETE	2 1 TITLE		Change Addition
NAME		2 2 NAME		
STREET ADDRESS		2 3 STREET ADDRESS		
CiTY-ST-ZIP		2 4 CITY - ST - ZIP		
TITLE	DELETE	3 1 711LE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
City-St-ZIP		34 CHTY-ST-ZIP		
TITLE	DELETE	4 1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY - ST - ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
TITLE NAME	[] beieff	5 2 NAME		L_1 Shangs L_1 Madicali
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP		
TITLE	DELETE	61 TITLE		Change Addition
NAME	\	6.2 NAME		 - -
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		64 CITY - ST - ZIP		
14. I do hereby certify that the information suppli- further certify that the information indicated of	ed with this filing is voluntarily for	urnished and does not go	ualify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes 1

turther certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE

Date

D

CR2E034 (3/96)