FILE NOW: F	ILING FEE AFTER	MAY 1 IS \$225.00
PROFIT	<b>€ 3. 4.</b>	FLORIDA DEPARTMENT OF STATE
CORPORATION		Sandra B. Mortham

ANNUAL REPORT

1996



Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name V36363 (2)

THE MC	)nogram shoppe, in	C.							
Principal Place o	f Business	Masing Addie	285			I IMBIL MISMAN ILIAM BILMA HILIA BALAN	i dešt Militia Redai		
13028 W. COL	ONIAL DR.		COLONIAL (						
WINTER GARD	EN FL 34787	WINTER G	ARDEN FL	34787		0 174.4	Tan Data	of Last Re	www.
US		00				3. Date Incorporated or Qualified 05/13/1992		5/29/199	
		Te- Maran				4. FEI Number			Applied For
2. Principal Plac	ce of Business	2a. Mailing A	CO-C22			59-3121601			Not Applicable
Suite, Apt #,	etc		Surte, Apt. #, etc.			5. Certificate of Status Desired		Additional	
2		27		.,					Required
City & State		City & St	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
3]		28		Country		8. This corporation has liability for	intano ble ta		
Zφ	Country	Zip		30			□ No		
1	25   9. Name and Address of Cu	29 29 Agent Registered Age	ent			10. Name and Address of New F	Registered	Agent	
	g, Haine and Address of Co			81	Name				
ANNIC D	DANIEL I SR			82	Street Addr	ess (P.O. Box Number is Not Acceptate	ile)		
	ILLARD ST			[	1				
	GARDEN FL 34787-3908			83					
*****	CANDELL LE CITE LE CONTRACTOR			84	City			85 Z <sub>I</sub>	p Code
					ì ·	ration submits this statement for the pured of directors. Thereby accept the app	FL	<u> </u>	
SIGNATURE _	Signature. Uped by printed rule endings force			аб'я на узыка Аф	e tragger to to a gree	ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTC	ORS IN 12
12.		S AND DIRECTORS	DELETE	1 1 1 1 TLF	· · · · · · · · · · · · · · · · ·	ADDITION OF THE OWNER OW		Change	
TITLE	D ANNIO DANKELL OD	L.	poetri	1.2 NAME	1				
NAME	ANNIS, DANIEL I., SR. 214 N DILLARD ST.				T ADDRESS				
STREET ADDRESS	WINTER GARDEN FL			1.4 City					
CITY-ST-ZIP TITLE	D D		DELETE	2 1 7 11				☐ Change	Addition
NAME	ANNIS, GAY		_	2.2 NAMI					
STREET ADDRESS	214 N DILLARD ST.			23 ST6E	EL ADDRESS				
CITY - ST - ZIP	WINTER GARDEN FL			2.4.0([)				FT Change	ET Addition
TITLE		Ĺ	DELETE	3 1 THL				Change	Addition
NAME				3.2 NAM					
STREET ADDRESS				l l	ELADORESS				
CITY-ST-ZIP			1 551574	3 4 C(1)				Change	Additio
TITLE		L	] DELETE	4 1 1 11					_
NAME				4.2 NAM	FT ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP		···	DELETE	5 1 1 III	- 51 - 216			Charige	Addiko
TITLE		L	Tourn	5 2 NAM	1				
NAME				II.	ELLADORESS				
STREET ADDRESS					-\$1-ZIP				
CITY-ST-ZIP		··· F	T DELFTE	6 LTd1				Change	Additio
TITLE	1	L		. ,	- 1				

CITY: ST-ZIP

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 | further certify that the information indicated on this annual report or suppliermental 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 trusted employees. It is report as required by Chapter 607, Florida Statutes, and that my name appears in Brock 13 or Brock

6.2 NAMe

6.3 STHEET ADDRESS

SIGNATURE:

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-656 7699