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 # V69509

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NOON ENTERPRISES, INC.

FILED									
Apr 30 1997 8:00am									
Secretary of State									

Principal Place of Business Mailing Address						-) 	
3680 E INDUST	RIAL	19136 PINE RUN LANE	19136 PINE RUN LANE						
Bayc Riviera Beach	I EL GOMA	FT. MYERS FL 33912-4815							
US	1 11 99404					3. Date Incorporated or Qualified	3a. Dat	le of Last R	Report
						10/05/1992	08/0	5/1996	
2, Principal P	lace of Business	2a, Mailing Address				4. FEI Number	1	A	pplied For
21		26			65-0376215 Not Applicable				
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	⊢			5. Certificate of Status Desired		4 - · · · ·	Additional equired
22 City & State		City & State	City & State					4	
23	•	— ·	28			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip				8. This corporation has liability for i			s. 199.032.
24	25	29	30			· · · · · · · · · · · · · · · · · · ·		No	,
	9, Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent	
)N, PATRICK J., III		B1	1	Name				
	86 PINE RUN LANE		82 Street Ac			ss (P.O. Box Number is Not Acceptab	le)		
FT. I	MYERS FL 33912		83		 				
			0.3	1					
			84	1	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Florida Statuter	s the abov	Д /е-і	named corne	pration submits this statement for the p		changing i	ds registered
office or r	egistered agent, or both, in the Sta	ate of Florida. Such change was au ligations of, Section 607,0505, Flor	uthorized b	y t	the corporation	on's board of directors. I hereby accep	the appo	ointment as	registered
ļ <u>*</u>	in ramiliar with, and accept the ob	ligations of, dection dor.codo, flor	ida Şiaidic	,,,					i
SIGNATURE	Signature, typed or printed name of registured	agent and title if applicable (NOTE	Registered Ag	genl	signature require	d when reinstating)	DATE		
12.	OFFICERS /	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	P DATES I	DELETE	1.1 TITLE					∐ Change	Addition
NAME	NOON III, PATRICK J		1.2 NAME						
STREET ADDRESS	19136 PINE RUN LANE FT. MYERS FL		1.3 STREET						i
CITY-ST-ZIP TITLE	V	☐ DELETÉ	1.4 CITY - 5 2.1 TO LE		ZIP			Change	Addition
NAME	MOON NU DATINOU I			2.2 NAME					E-qual 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STREET ADDRESS	5040 E ELMHURST RD			2.3 STREET ADDRESS					
CITY-ST-ZIP	W. PALM BCH. FL			2. 4 CI1Y-S1-ZIP					
TITLE	ST	DETELE	3.1 TITLE					Change	Addilion
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	TA	DDRESS				
CITY-ST-ZIP	FT. MYERS FL		3.4. CITY-		- ZIP			<u> </u>	1 1 4 4 5 5
TITLE		DELETE	4,1 TITLE					L Change	
NAME OTOTET ADDOSOO			4. 2 NAME		0.000				
STREET ADDRESS			4.3 STREE						
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5 5.1 TITLE		- 211			Change	Addition
NAME			5.2 NAME					-	
STREET ADDRESS		4	5.3 STREF1 /		DORESS				
CITY-ST-ZIP			5.4 CITY -	\$1-	- ZIP				
TITLE	-	☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			63STREE	I AI	DDRESS				
CHTY-ST-ZIP	by antifuthat the information	shoot with this filing does not exact	6.4 CHY-			in Continu 110 07/97/9 Elected Ci-1-4-	1 fuether	contifu the	t tho
informatio	on indicated on this annual report of	or supplemental annual report is tru	ue and acc	cura	ale and that i	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega	l effect as	if made ur	nder oath; that
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 any attachment with in address.									