

PROFIT
CORPORATION
ANNUAL REPORT

2000



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

FILED

00 MAY 23 PM 3:40

DOCUMENT # 656977

(6)

Corporation Name
AMBCO CORPORATION INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Original Place of Business
BEACH RD
SARASOTA FL 34242

Mailing Address
420 BEACH RD
SARASOTA FL 34242-1980

3. Date Incorporated or Qualified
02/25/1980

3a. Date of Last Report
1999

4. FEI Number
59-1974443

Applied For
Not Applicable

Principal Place of Business
26

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

City & State
28

Country
25

Country
29

Country
30

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
MESHAD, JOHN W
1900 RINGLING BLVD
SARASOTA FL 33577

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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 *MA*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
LOFINO, CHARLES J.		1.2 NAME	
420 BEACH ROAD		1.3 STREET ADDRESS	
SARASOTA FL		1.4 CITY - ST - ZIP	
DVP	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
LOFINO, MICHAEL D.		2.2 NAME	
628 BEACH ROAD		2.3 STREET ADDRESS	
SARASOTA FL		2.4 CITY - ST - ZIP	
DC	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
GIGANTE, BARBARA		3.2 NAME	
50 HILLVIEW LANE		3.3 STREET ADDRESS	
STATEN ISLAND NY		3.4 CITY - ST - ZIP	
DVP	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
GIGANTE, ROBERT		4.2 NAME	
50 HILLVIEW LANE		4.3 STREET ADDRESS	
STATEN ISLAND NY		4.4 CITY - ST - ZIP	
DT	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
LOFINO, MICHAEL JR.		5.2 NAME	
628 BEACH ROAD		5.3 STREET ADDRESS	
SARASOTA FL		5.4 CITY - ST - ZIP	
	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY - ST - ZIP	

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****150.00 ****150.00

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: *Barbara A. Gigante*

CR2F034 (9/96)