

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F04613** (8)
1. Corporation Name
DILORETO & SONS, INC.

Principal Place of Business 2121 N.W. 15TH AVENUE POMPANO BEACH FL 33069	Mailing Address % CENTRAL INVESTMENT CORP P.O. BOX 42670 CINCINNATI OH 45242 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 10/31/1980	
4. FEI Number 59-1998709		Applied For Not Applicable		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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				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	

11. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition			
NAME	ARMIDSON, PHILIP L		1.2 NAME				
STREET ADDRESS	4 TARRINGTON CIRCLE		1.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS FL		1.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition			
NAME	WARD, R H		2.2 NAME				
STREET ADDRESS	5 SPRING KNOLL DR		2.3 STREET ADDRESS				
CITY-ST-ZIP	CINCINNATI OH		2.4 CITY-ST-ZIP				
TITLE	VD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition			
NAME	CAUDILL, RICHARD W		3.2 NAME				
STREET ADDRESS	2 BANCHORY CT		3.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BCH GARDENS FL		3.4 CITY-ST-ZIP				
TITLE	CD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition			
NAME	KOONS, J.F. III		4.2 NAME				
STREET ADDRESS	8320 CAROLINE'S TRACE		4.3 STREET ADDRESS				
CITY-ST-ZIP	CINCINNATI OH		4.4 CITY-ST-ZIP				
TITLE	V	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition			
NAME	THOMPSON, REX E		5.2 NAME				
STREET ADDRESS	232 EAGLETON LAKES BLVD		5.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS FL		5.4 CITY-ST-ZIP				
TITLE	WX	☐ DELETE	6.1 TITLE	☒ Change ☐ Addition			
NAME	SHELL, KEVEN E.		6.2 NAME	V			
STREET ADDRESS	724 YALE AVENUE		6.3 STREET ADDRESS	Shell, Keven E.			
CITY-ST-ZIP	TERRACE PARK, OH		6.4 CITY-ST-ZIP	724 Yale Avenue Terrace Park, OH			

14. I 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: *Keven E. Shell* 4-29-98 (513) 563-4700

CR2E034 (10/97)

Florida Department of State
Corporation Annual Report
1998

DiLoreto & Sons, Inc.

Block 12

8.1 Title	V
8.2 Name	Zapata, Angel M.
8.3 Street Address	1018 Corallita Ct.
8.4 City-St-Zip	West Palm Beach, Florida 33414

8.1 Title	D
8.2 Name	Gamstetter, Neil C.
8.3 Street Address	5578 Chatfield Dr.
8.4 City-St-Zip	Fairfield, Ohio 45014

Block 13

Addition

8.1 Title	T
8.2 Name	William P. Martin, II
8.3 Street Address	36 Sabre Drive
8.4 City-St-Zip	Cold Springs, Kentucky 41076