SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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11/24/97 (407)740-4111

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4	PROFIT	FLORIDA DEPA	ARTMENT OF STATE		
COF	RPORATION (1)	(A)	B. Mortham	1	
	JAL REPORT		ary of State	FILED	
	V. V. S. W.	7.7	CORPORATIONS	Filmini	
	1997		COM CHANONS	97 JUL 250 PM	3: 39
DOCUI 1. Corporatio	MENT # H98242	2 (1)		SECRETARY OF ST	- "
DECICO	CIO & ASSOCIATES, P.A.			TALLAHASSEE, FL	ORIDA
•				I WEEKINGOCOLO	III ACCI ALDI GIGIL GIALI GIGIL GIGIL IGAL
Principal Plac	e of Business	Mailing Address			DIAN BIBIK DIBIN BIBIN BIBIN BIBIN BIBIN BIBI
C/O DANIEL	DEGICCIO	C/O DANIEL DECICCIO			
40 N. CHANGE AVENUE: BUTTE FOR 652 W. MOUSE 40 N. CHANGE AVE., STE NOT 652 W. MOUSE				50 107 100	TC 11.47.110 BD4.05
US US ORANDO FL 00001			Bird.	3. Date Incorporated or Qualified	TE IN THIS SPACE 3a. Date of Last Report
03	PL 527	eg US	WinterPark, FC	1	
2 Principal P	lace of Business	2a. Mailing Address	32789	02/07/1986 4. FEI Number	06/24/1996 Applied For
21	aco or basinoss	26		59-2633009	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		33 3333444	SQ 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has	
24	25	29	30	Personal Property Tax due Jui	
	g. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New I	Registered Agent
	CICIO, DANIEL		81 Name		
				ess (P.O. Box Number is Not Accept	able)
STE OUT WinterPark, FL 32789			7 83		
OR	LANDO FL 02001	• • • •	' 63		
			84 City		FL 85 Zip Code
44 6		0			
office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State	of Florida, Such change was	authorized by the cornorati	oration submits this statement for the ion's board of directors. I hereby acc	ept the appointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	nt and tills H applicable (AV)	ITE: Registered Agent signature require	ad when reinstation)	DATE
12.	OFFICERS AND		13.		FICERS AND DIRECTORS IN 12
TITLE	VPS	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME	DECICCIO, DANIEL		1.2 NAME	100002	252241n
STREET ADDRESS	1630 LAUREL ROAD		1.3 STREET ADDRESS	-07/30	2522 410 /9701045005
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP		65.00 ****165.00
TITLE	***************************************	DELETE	2.1 TITLE		Change Addition
NAME 4			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
THLE		☐ DELETE	3.1 TIFLE		Change Addition
NAME			3.2 NAME		
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TITLE		DELETE	4.1 TITLE	***************************************	☐ Change ☐ Addition
NAME			4. 2 NAME		
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CITY-ST-ZIP			4.4 CITY-ST-ZIP		$\mathcal{O}_{\mathcal{O}}}}}}}}}}$
TITLE		DELETE	5.1 TITLE		thange A Adultion
NAME			5.2 NAME		25 (X
STREET ADDRESS			5.3 STREET ADDRESS	•	\sim
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	•		6.4 CfTY-ST-ZIP		
14. I do heret	by certify that the information supplied	with this filing does not qual	lify for the exemption stated	in Section 119.07(3)(i), Florida Statu	tes. I further certify that the
informatio I am an oi	n indicated on this annual report or s flicer or director of the corporation or	upplemental annual report is the receiver or trustee empor	true and accurate and that wered to execute this report	my signature shall have the same leg as required by Chapter 607. Florida	gal effect as if made under oath; that Statutes; and that my name
	n Block 12 or Block 13 if changed, or			4	· · · · · · · · · · · · · · · · · ·

DECICCIO, HERZFELD & RUBIN

652 WEST MORSE BOULEVARD WINTER PARK, FLORIDA 32789

TELEPHONE (407) 740-4111

20FZ

FACSIMILE (407) 740-4011

TAX I.D. # 59-2633009

JAMES B. BIRMINGHAM
DANIEL DECICCIO+
SHEILA GUPTA DECICCIO+
MARGARET S. HEWITT
WAYNE JOHNSON
DOUGLAS A. SACHS+
*BOARD CERTIFIED IN WORKERS' COMPENSATION
*LICENSED IN FL, MA, & R!

+LICENSED IN PL & MA

July 24, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Annual Corporate Report

Dear Sirs:

I am in receipt of our 1997 Annual Corporate Report which states "Second Notice". Please be advised that we moved to the above address in August of 1996 and left a forwarding address with our previous mail carrier, but we are not in receipt of the first notice of the filing fee for the Corporate Annual Report. I am enclosing the \$165.00 filing fee and ask that you please waive the late charge of \$385.00 in that we never received the first notice. Thank you for your consideration.

Sincerely,

Daniel De Ciccio

DD/kb

Enclosure