

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K44229 (8)**

1. Corporation Name

**GORDON DIBATTISTO, JR., INC.**



Principal Place of Business

2122 S.W. 60TH TER  
MIRAMAR FL 33023-2934

Mailing Address

2122 S.W. 60TH TER  
MIRAMAR FL 33023-2934

3. Date Incorporated or Qualified

11/08/1988

3a. Date of Last Report

09/21/1995

2. Principal Place of Business

21 8231 BAMA LN Bayto

2a. Mailing Address

26 16244 E. GLASGOW DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0093281

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

22. City & State

23 West Palm Beach, FL

27. City & State

28 LOXAHATCHEE, FL

24. Zip

33411

25. Country

25 Palm Beach

29. Zip

33470

30. Country

30 Palm Beach

9. Name and Address of Current Registered Agent

DIBATTISTO, GORDON JR  
16244 E. GLASGOW DR  
LOXAHATCHEE FL 33470

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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: Gordon Dibattisto Jr. Pres

Sandra B. Morham Sec 4/25/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: PTD  
NAME: DIBATTISTO, GORDON JR  
STREET ADDRESS: 16244 E. GLASGOW DR  
CITY-ST-ZIP: LOXATCHEE FL 33470

TITLE: VSD  
NAME: DIBATTISTO, LINDA  
STREET ADDRESS: 16244 E. GLASGOW DR  
CITY-ST-ZIP: LOXATCHEE FL 33470

TITLE: [ ] DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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STREET ADDRESS:  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE: [ ] Change [ ] Addition  
12 NAME:  
13 STREET ADDRESS:  
14 CITY-ST-ZIP:

21 TITLE: [ ] Change [ ] Addition  
22 NAME:  
23 STREET ADDRESS:  
24 CITY-ST-ZIP:

31 TITLE: [ ] Change [ ] Addition  
32 NAME:  
33 STREET ADDRESS:  
34 CITY-ST-ZIP:

41 TITLE: [ ] Change [ ] Addition  
42 NAME:  
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44 CITY-ST-ZIP:

51 TITLE: [ ] Change [ ] Addition  
52 NAME:  
53 STREET ADDRESS:  
54 CITY-ST-ZIP:

61 TITLE: [ ] Change [ ] Addition  
62 NAME:  
63 STREET ADDRESS:  
64 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. 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: Gordon Dibattisto Jr. Pres

Sandra B. Morham Sec 4-25-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)