

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000013726 (1)

1. Corporation Name
VESTINOS, INC.



Principal Place of Business

Mailing Address

6475 CENTRAL AVE
ST PETERSBURG FL

6475 CENTRAL AVE
ST PETERSBURG FL

3. Date Incorporated or Qualified
02/17/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

Applied For

59-3297814

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 ☐

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARDEN, SERENA
411 ORIOLE CIR
PALM HARBOR FL 34683

81 Name

Vestinos, Serena E.

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

65 Lifestyles Blvd., Apt. 1112

83

84 City

Palm Harbor

FL

85 Zip Code

34685

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 607.0405, Florida Statutes.

SIGNATURE

Serena E. Vestinos

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME BARDEN, SERENA

STREET ADDRESS 411 ORIOLE CIR
CITY-STATE-ZIP PALM HARBOR FL 34683

1. 1 TITLE

S/T

☒ Change ☐ Addition

12 NAME

Serena E. Vestinos

13 STREET ADDRESS

65 Lifestyles Blvd. Apt. 1112

14 CITY-STATE-ZIP

Palm Harbor, FL 34685

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

2. 1 TITLE

P/V

☐ Change ☒ Addition

22 NAME

Sotirios Vestinos

23 STREET ADDRESS

65 Lifestyles Blvd. Apt. 1112

24 CITY-STATE-ZIP

Palm Harbor, FL 34685

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

3. 1 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

4. 1 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

5. 1 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

6. 1 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-STATE-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:

Serena E. Vestinos
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/96
Date

343-6808
Daytime Phone

CR2E034 (12/95)