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FILED

Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000070977 (0)

1. Corporation Name
BARACCA, INC.

Principal Place of Business
4910 TAMiami TRAIL NORTH
NAPLES FL 33940

Mailing Address
4910 TAMiami TRAIL NORTH
NAPLES FL 34103-3068



3. Date Incorporated or Qualified 09/14/1995
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65-0617880

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALUMBO, ROSWITHA
4910 TAMiami TRAIL N
NAPLES FL 33940

81 Name

Palumbo, Roswitha

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

7654 Pebble Creek Circle

83

#204

84 City

NAPLES

FL

85 Zip Code
34108

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

Roswitha Palumbo

(NOTE: Registered Agent signature required when reinstating)

DATE

2/18/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME ROSWITHA, PALUMBO
STREET ADDRESS 4910 TAMiami TRAIL N
CITY-ST-ZIP NAPLES FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

7654 Pebble Creek Circle
NAPLES, FL 34108 #204

TITLE ☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE ☐ DELETE

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-ST-ZIP

TITLE ☐ DELETE

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-ST-ZIP

TITLE ☐ DELETE

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY-ST-ZIP

TITLE ☐ DELETE

10.1 TITLE

10.2 NAME

10.3 STREET ADDRESS

10.4 CITY-ST-ZIP

TITLE ☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

TITLE ☐ DELETE

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

TITLE ☐ DELETE

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

TITLE ☐ DELETE

14.1 TITLE

14.2 NAME

14.3 STREET ADDRESS

14.4 CITY-ST-ZIP

TITLE ☐ DELETE

15.1 TITLE

15.2 NAME

15.3 STREET ADDRESS

15.4 CITY-ST-ZIP

TITLE ☐ DELETE

16.1 TITLE

16.2 NAME

16.3 STREET ADDRESS

16.4 CITY-ST-ZIP

TITLE ☐ DELETE

17.1 TITLE

17.2 NAME

17.3 STREET ADDRESS

17.4 CITY-ST-ZIP

TITLE ☐ DELETE

18.1 TITLE

18.2 NAME

18.3 STREET ADDRESS

18.4 CITY-ST-ZIP

TITLE ☐ DELETE

19.1 TITLE

19.2 NAME

19.3 STREET ADDRESS

19.4 CITY-ST-ZIP

TITLE ☐ DELETE

20.1 TITLE

20.2 NAME

20.3 STREET ADDRESS

20.4 CITY-ST-ZIP

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

14. 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:

Roswitha Palumbo

2/18/97

495-9005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)