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

Mailing Address

SUERRY M SYROP

2a. Mailing Address

City & State

26

28

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Name and Address of Current Registered Agent

1515 UNIVERSITY DRIVE, SUITE 218

CORAL SPRINGS FL 33071

SAUE

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT

1996

1515 UNIVERSITY DRIVE, SUITE 218 CORAL SPRINGS FL 33071

21 865 5. CONGRESS

PALL BEACH,

25

1515 UNIVERSITY DRIVE, SUITE 218

CORAL SPRINGS FL 33071

Principal Place of Business

2. Principal Place of Business

SYROP, JERRY M

Suite, Apt. #, etc.

City & State

WEST

22

23

WJERRY M SYROP



FLORIDA DEPARTMENT OF STATE

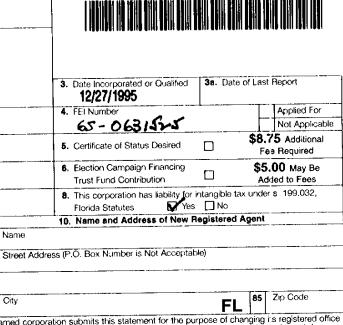
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P96000000997 (2) DOCUMENT # Corporation Name

SICILIANO ENTERPRISES, INC.



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 is registered affice 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. 2-15-96 M. Syrop red ag ni and tille if applicable JERRY SIGNATURE (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1. 1 TITLE TITLE CR2E034 SICILIANO, MICHAEL 1.2 NAME NAME %1515 UNIVERSITY DR, SUITE 218 1.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 1.4 CITY - ST - ZIP CHY-ST-ZIP Change [] Addition ☐ DELETE 2 1 TITLE TITLE KEATHLEY, TIMOTHY 2.2 NAME NAME %1515 UNIVERSITY DR, SUITE 218 2.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 24 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE 3 1 TITLE TITLE DAVIES, SANDRA 3.2 NAME NAME %1515 UNIVERSITY DR, SUITE 218 3.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 34 CITY-ST-ZIP CITY - ST- ZIP ☐ Char-ge ☐ Addition DELETE 4 1 TITLE TITLE BURBBATT, SANDRA 4.2 NAME NAME %1515 UNIVERSITY DR. SUITE 218 4.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 5 1 TITLE TITLE 5.2 NAME NAM² 5.3 STREET ADDRESS STREET ADDRESS 5.4 DITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is well-nearly 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 expeptemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an arachment with appendicess.

Country

81 Name

82

83

64 City

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ResideNT SIGNATURE: X SIGNATURE AND TYPED