FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000020003 (5)

BIANCO ENTERPRISES OF CENTRAL FLORIDA, INC.

Principal Place of Business Mailing Address				
2700 HILLIARD COURT KISSIMMEE FL 34744	2700 HILLIARD COURT KISSIMMEE FL 34744-4108			
			3. Date Incorporated or Qualified 03/05/1996	3a. Date of Last Report
2. Principal Place of Business 21	28. Mailing Address 26		4. FEI Number 59 - 3364906	Applied For Not Applicable
Suite, Apt. #, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country 25	Zip 3	Country 0	This corporation has liability for i Florida Statutes	ntangible tax under s. 199.032, Yes No
9. Name and Address of Curre			10. Name and Address of New Re	gistered Agent
BIANCO, MARY JO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	81 Name		
2700 HILLIARD COURT KISSIMMEE FL 34744		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
NIODIMMEE PL 34/44		83		
		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 05	502 and 607 1508, Florida Statutes	s, the above-named core	poration submits this statement for the p	
11. Pursuant to the provisions of Sections 607 05 office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obli-	te of Florida, Such change was au	Morized by the comporal	tion's board of directors. I hereby accept	of the appointment as registered
Many To Diaman	V 11	Mar 4 17/1	nio -	-2124/97
SIGNATURE MALY JO BIATICO Signature typed or printed manual of registered a	igent and title if applicable (NOTE:	Pegistr ed Hent signature requi	red when re-nstating)	DATE
12. OFFICERS A	ND DIRECTORS	13//	ADDITIONS/CHANGES TO OFFIC	
THE D	DELETE	1.1 ITE		L Change Addition
NAME BIANCO, MARY JO		1.2 NAME		
STREET ADDRESS 2700 HILLIARD COURT		1.3 STREET ADDRESS		i
CITY-ST-ZIP KISSIMMEE FL 34744		1.4 CITY-ST-ZIP		
THTLE	☐ DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		8, 4
STREET ADDIFESS		2.3 STREET ADDRESS	·	
CITY - ST - ZIP	DELETE	2 4 CITY - ST - ZIP		Change Addition
TIFLE		3.1 TITLE		TT CHAIRE TO WOOMING !
NAME OVER A MARKET AND AND A		3.2 NAME.		
STREET APPRESS		3.3 STREET ADDRESS		
CHY-SI-20F	DELETE	34. City-ST-ZIP 41 Title		Change Addition
NAME	First Press	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CHY-S7-ZIP		4.4 CITY - ST- ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME:	_	5.2 NAME		
STREEL ADDRESS		5.3 STREET ADDRESS		
CHY - S1 - 210°		5.4 CITY-\$1-7IP		
TILE	DELETE	6.1 1/1LE	, , , , , , , , , , , , , , , , , , ,	Change Addition
NAME		6.2 NAME		-
STREET ADDRESS		6.3 STREET ADDRESS		
00 × 51 70		6 A CITY_ST_7IP	·	<u> </u>

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 at an address.