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

PROFIT CORPORATION . ANNUAL REPORT



FLORIDA DEPARÉMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

567 SEAVIEW CT E-4

MARCO ISLAND FL 34145

1998

P97000038981 (1)

FICHERA PI	ROPERTIES, INC.							
Principal Place of Business		Mailing Address	\$					
367 SEAVIEW CT E-4 MARCO ISLAND FL 34145		567 SEAVIEW C MARCO ISLAND		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
2. Principal Place of Business		2a. Mailing Add 26 Suite, Apt. #		04/30/1997 4. FEI Number 59-344/185				
Suite, Apt. #, etc		27 Suite, Apr. #	, etc.	5. Certificate of Status Desired \$8				
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution				
Zip 24	Country 25	Z ip 29	Country 30	8. This corporation owes or has paid the current ye Personal Property Tax due June 30.				
	Name and Address of Cu L PASQUALE S	irrent Registered Agent	81 Name	10. Name and Address of New Registered Agent				

Feb 12 1998 8:00am Secretary of State

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

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ent year Intangible

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 Signature, typed or profind harrer of registered agent and title dispellicable (NOTE Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS	/CHANGES TO OFF	ICERS AND DIRE	CTOR	S IN 12			
TIFLE	D	DELETE	1.1 TITLE			☐ Ch	ange	Addition			
NAME	FICHERA, PASQUALE S		1,2 NAME				İ				
STREET ADDRESS	567 SEAVIEW CT E-4		1.3 STREET ADDRESS								
CITY-ST-ZIP	MARCO ISLAND FL 34145		1.4 CITY - ST - ZIP					1			
TITLE	D	DELETE	2.1 TITLE			Ch	ange	Addition			
NAME	FICHERA, NANCY A	1	2.2 NAME)	ì			
STREET ADDRESS	567 SEAVIEW CT E-4		2.3 STREET ADDRESS				1				
CITY-ST-ZIP	MARCO ISLAND FL 34145		2. 4 CITY-ST-ZIP								
TITLE		DELETE	3.1 TITLE			☐ Ch	ange	Addition			
NAME			3.2 NAME				}	ł			
STREET ADDRESS			3.3 STREET ADDRESS]			
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TITLE			☐ Ch	ange	Addition			
NAME			4.2 NAME								
STREET ADORESS			4.3 STREET ADDRESS					l			
CITY-ST-ZIP			44 CITY-ST-ZIP								
TITLE		DELETE	5.1 TITLE	••		☐ Ch	ange	Addition			
NAME			5.2 NAME					*			
STREET ADDRESS			5 3 STREET ADDRESS								
CITY - ST - ZIP			5.4 CITY - ST - ZIP		····						
TITLE		DELETE	6.1 TITLE			∐ Ch	ange	☐ Addition			
NAME			6.2 NAME				-	j			
STREET ADDRESS			6.3 STREET ADDRESS				Ì	1			
CITY-\$1-ZIP			64 CITY-ST-ZIP								
14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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: Parqual & 1chera 1-12-98 941-624-0825											

83 84 City