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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 11 1997 8:00am

Secretary of State

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## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000037462 (4)

LA FAMIGLIA VERONA INC.

SIGNATURE

Principal Place of Business Mailing Address					i itagitat ina tana Bitir akut dani dani bani bani tahu iabu dibia bura ust taai		
17755 PARK VILLAGE BLVD FT MYERS FL 33908-6131			17755 PARK VILLAGE BLVD FT MYERS FL 33908-6131				
					3. Date Incorporated or Qualified 04/24/1996	3a. Date o	f Last Report
2. Principa	al Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-065446	. 5	Not Applicable
Suite, A	pt #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>5</b>	8.75 Additional Fee Required
		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution		Added to Fees
Zip	Country	Z <sub>I</sub> p	Country		8. This corporation has liability for it	. ~ <i>~</i>	
24	25	29	30	. , , , , , , , , , , , , , , , , , , ,		Yes 🛂	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Reg	latered Age	nt
	ERONA, PASQUALE A		<b>P</b> 1	Name			
17755 PARK VILLAGE BLVD FT MYERS FL 33908-6131				Street Address (P.O. Box Number is Not Acceptable)			
			3				- 111112
			4	City	77 11	FL 8	5 Zip Code
11 Pursua	ant to the provisions of Sections 607.0	1502 and 607 1508. Florida Stat	tutes the	named corpo	ration submits this statement for the p	* ·	angino its registered
office agent	or registered agent, or both, in the St I am famil ar with, and accept the ob	ate of Florida. Such change wa digations of, Section 607,0505,	s authoriz Florida Strees	he corporation	n's board of directors. I hereby accep	t the appoint	ment as registered
SIGNATUR	RE			<u> </u>			
12.	Signature, typed or printed name of registered	AND DIRECTORS	OTE: Registen Agent	signature requires	when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE EDS AND DI	DECTORS IN 12
TITLE	D OFFICENS	DELETE	1.1 T E	<del></del>	ADDITIONS/OFFAINGES TO OFFICE		Change Addition
NAMÉ	VERONA, FELICIA M	L., 5,000,00	1.2 N 4E	1			
STREET ADDRE	ATTER DADY MILLAGE DILL		1.3 STEET AL	nnocce			
	FT MYERS FL 33908-0161					33908	- 6/3/
CITY - ST - ZIP	D	DELETE	14 CM 7-ST- 21 THLE			U U	- <i>G</i> ( <i>3</i> / Change
NAME	VERONA, MATTHEW F	C DEEE.	2 2 NAME		- 11	, –	
STREET ADDRE	AGGE CLOU AND OT		2.3 STREET AL	ODDECC 13	1955 PARK VILL	Age	Blod.
	SYLVAN LAKE MI 48320		2.3 STREET AL	DUNESS	of Wien El.	77.32	98-1121
CITY+ST+ZIF TITLE	D	DELETE	3.1 TITLE	- 214	My My Cas . C	721	Change Addition
	VERONA/SFILIGOJ, JEAN M	<del></del>	3.2 NAME		11/11/11		1/ /
NAME STREET ADORE	CALA LINE PETEL BILL AND AN AL		3.3 STREET A	nnoree 12	755 PARK ICULA	oc h	X-d
	COCONUT CREEK FL 3307		3.3 STREET AL	-7ID	1755 PARK Ville est Hyers FC 1755 Park Villa est Hyens PC	3390	7-6/21
CITY-ST-ZIP	D	DELETE	4.1 TITLE	- 415	·· ·· · · · · · · · · · · · · · · · ·	1	Change   Addition
NAME	VERONA, MICHAEL A	band sound to	4. 2 NAME			النسط	
NAME STREET ADDRE	AAAA KKU ATTU TEBBACE		4.2 NAME 4.3 STREET A	DDBESS			
l	BOCA RATON FL 33434		4.3 SINCET A				
C/TY+S1+7IP TITLE	D	DELETE	5.1 TITLE	E II		- P	Change Addition
NAME	VERONA, ANTHONY Y		5.2 NAME	ŀ			
STREET ADDRE	MANE CADI MAID OT		5.3 STREET A	DINESS 17	755 PARK VILL	dore B	and a
	SYLVAN LAKE MI 48320		5.4 CITY-ST	71D Z	755 Park Vill. of Myens Al	Z290	8-6131
CITY S1-ZIP	ALEXAS PASS MILANOED	DELE1E	6.1 THILE	rzir /	in your it	ا عرب	Change Addition
NAME	i		62 NAME			•	
İ	ree		6.3 STREET A	DDDCCC			
STREEL ADDRI	199		O.3 STREET A	IDUNESS			

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.

TEU NAME OF SIGNING OFFICER OR DIRECTOR