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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90017 006 \*\*\*150.00

## DOCUMENT # J58585

CRAVINO ENTERPRISES, INC.

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Principal Plac	e of Business	Mailing Address			I IDDILLE BIEF BIEF THEN DIEB IEFE BIEF	1 1914 <b>414</b> 11 2 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
9600 NW 25TH	I ST	9600 NW 25TH ST						
STE 6-A	_	STE 6-A			DO NOT WRITE IN	THIS SPACE		
MIAMI FL 33172 MIAMI FL 33172				3. Date Incorporated or Qualifed	17.10 01.1.102			
					02/20/1987			
2 Principal F	Place of Business	2a. Mailing Address			4. FEI Number		olied For	
21		26			-65-013565# 65-0 175	800 Not	Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> A		
22		27			3. Certificate of classes Bosines	Fee:Rec	quired	-=
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	Country		8. This corporation owes the current ye		&No	
24	25	29 30	<u>'l</u> -		Personal Property Tax.  10. Name and Address of New Regist		500	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Regist	erea Agent		
11116	ACS, JOHN						. ,	
1825 CORAL WAY			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
SUITE 102			83				<del></del> j	
MIAMI FL 33145								
			84	City		FI 85 Zip C	Code	
1			1					
44 Dureuge	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above	e-named corpo	pration submits this statement for the purpo	se of changing its I	registered	
office or	registered agent or both in the State of	i Fiorida. Such change was auth	orizea dv	the corporation	oration submits this statement for the purpo n's board of directors. I hereby accept the	se of changing its i appointment as reg	registered gistered	
office or agent. I	registered agent, or both, in the State o am familiar with, and accept the obligati	i Fiorida. Such change was auth	orizea dv	the corporation	pration submits this statement for the purpo n's board of directors. I hereby accept the	se of changing its lappointment as reg	registered gistered	
office or	registered agent, or both, in the State o am familiar with, and accept the obligation	f Florida. Such change was auth ons of, Section 607.0505, Florida	orized by a Statutes	the corporation	n's poard of directors. Thereby accept the	appointment as reg	registered pistered	í
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office or agent. I ag	registered agent, or both, in the State of am familiar with, and accept the obligation of registered agent OFFICERS AND DPT FERRANDO, LAURO CRAVINO	IF Florida. Such change was authons of, Section 607.0505, Florida and title if applicable. (NOTE: ReDIRECTORS	gistered Ager  13.  1.1 TITLE  1.2 NAME  1.3 STREE	TADDRESS	when reinstating)  DA	TE RS AND DIRECTO	RS IN 12	(00) 44/ 00L0CL
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14. I 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, with all other like empowered.

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

Change

☐ Addition