

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

50 MAY -1 AM 12:42

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 155007 (8)

1. Corporation Name

INGRAO CORPORATION

Principal Place of Business
**8636 TAHOE COURT, #12
TAMPA FL 33614**

Mailing Address
**8636 TAHOE COURT, #12
TAMPA FL 33614**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/28/1948** 3a. Date of Last Report **06/20/1994**

4. FEI Number **59-0621958** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt. #, etc.

26 Suite Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DOLCIMASCOLO, A.I.
8636 TAHOE COURT, #12
TAMPA FL 33614**

81 Name

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

83

84 City

FL

85 Zip Code

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 its registered 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 of person in and best name of registered agent and their signature

Signature of registered agent or registered agent and their signature

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

**PD
DOLCIMASCOLO, A.I.
8636 TAHOE COURT #12
TAMPA FL 33614**

1.1 TITLE

☐ Change ☐ Addition

NAME

1.2 NAME

STREET ADDRESS

1.3 STREET ADDRESS

CITY, ST, ZIP

1.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

2.1 TITLE

☐ Change ☐ Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY, ST, ZIP

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

3.1 TITLE

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE

4.1 TITLE

☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY, ST, ZIP

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

5.1 TITLE

☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY, ST, ZIP

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

6.1 TITLE

☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY, ST, ZIP

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(9)(b), Florida Statutes. I further certify that the information included in 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 reason for inclusion is as stated in this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an affidavit filed with this report.

SIGNATURE: **A.I. Dolcimassolo Pres.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
A. I. DOLCIMASCOLO

4/27/95 (813) 931-8909