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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| DOCUN 1, Corporation | MENT # 16880 | 6 (8) | | | |
|---|---|---|--|--|---|
| · | LOCK CORPORATION | | | 1.48(8) 118(8 4)(4) (8(8) 48(1) 48(1) 48(1) | |
| | | | | | |
| Principal Place of Business Mailing Address | | | | I SEALD! (1818 BLIB) 19141 BRUD | ann annn araul aidhr bháir Eisin diáit (6166 183) |
| %anthony 1617 \$ Divi Orlando F US | SION ST | %ANTHONY DACATO 1617 S DIVISION ST ORLANDO FL 32805 US | | | 3a. Date of Last Report |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | 04/25/1952 4. FET Number | 03/01/1995 |
| 21 | 3 4. 200. 1000 | 26 | | 59-0671726 | Applied For Not Applicable |
| Suite, Apt. # | , etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| City & State | | 27 | | 5. Cermicale of Status Desired | Fee Required |
| 23 | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| <i>Z</i> (p 24 | Country 25 | Zφ 29 | Country | 8. This corporation has liability for inte | angible tax under s. 199.032, |
| | 9. Name and Address of Current | | 30 | florida Statutes X Yes 10. Name and Address of New Rec | |
| | | | 81 Name | | in Agent |
| DACATO, ANTHONY 82 Street | | | 82 Street A | ddress (P.O. Box Number is Not Acceptable) | |
| 1617 S DIVISION | | | ļ <u>.</u> | · · · · · · · · · · · · · · · · · · · | |
| UKLANI | DO FL 32805 | | 83 | | |
| | | | 84 Oity | | 85 Zip Code |
| 11. Pursuant to | the provisions of Sections 607.0502 a | and 607.1508, Florida Statute | s, the above named con | poration submits this statement for the purpo | |
| | ed agent, or both, in the State of Florida n, and accept the obligations of, Section | | od by the corporation's b | poration submits this statement for the purpo- oard of directors. Thereby accept the appoin | tnient as registered agent. I am |
| SIGNATURE | | | | | |
| 12. | Signature, typed or printed name of registered agent, a OFFICERS AND | | m Bugistered Agent signal ira red | ADDITIONS/CHANGES TO OFFICE | DATE DIDECTOR OF A LAR |
| TITLE | PD | DELETE | 1 1 TITLE | S | Charge K Addition |
| NAMÉ | DACATO, ANTHONY | | 1 2 NAME | Freeman, Adam S. | — • • • • • • • • • • • • • • • • • • • |
| STREET ADDRESS | 1617 S DIVISION STREET | | | 1617 S. Division Ave. | |
| CITY-S1-ZIP | ORLANDO FL | | | Orlando FL 32805 | |
| TITLE | STD | DETE LE | 2 1 TITLE | | Change Addition |
| NAME STREET ADDRESS | DACATO,IDA 1617 S DIVISION STREET | | 2 2 NAME | | |
| CITY-ST-7IP | ORLANDO FL | | 2.3 STREET ADDRESS | | İ |
| TITLE | V | DELETE | 2 4 CITY - ST - 74P 3 1 TILLE | | Change C Addition |
| NAME | DACATO, ANTHONY J | | 3 2 NAME | | Change Addition |
| STREE I ADDRESS | 1617 SO DIVISION AVE | | 3.3 STHEET ADDRESS | | |
| CITY - ST - ZIP | ORLANDO FL | | 3.4 CHY+ST-7IP | | |
| TITLE | ٧ | ☐ DELETE | 4 1 TITLE | | Change Addition |
| NAME - | FREEMAN, JOHN | | 4.2 NAME | | |
| STREET ADDRESS | 1617 SO DIVISION AVE | | 4.3 STREE! ADDRESS | | |
| Criv-Si-ZiP Title | ORLANDO FL | ☐ DELETE | 4.4 CHY-SI-7IP | | |
| NAME | | □ octric | 5 1 TITLE 5 2 NAME | | Change Addition |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CHY-ST-ZIP | | } |
| TITLE | | DEL ETE | 6 1 TiTLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6 3 STREET ADDRESS | | |
| CITY-ST-ZIP | and it that the information and the | L. Alice Francisco | 6 4 CITY - \$1 - ZIP | | |
| certify that t | being that the information supplied will the information indicated on this annual | in unis tiling is voluntarily turni: report or supplemental annu | sneo and does not qualify all report is true and acco | y for the exemption stated in Section 119.07(| 3)(k), Florida Statutes, I further |

oath; that I am an officer or director of the corporation or the receiver or trusted 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 trusted repowered 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: Stan DaCato II da DaCato March 20 1996 (407) 420-3768