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

FLORIDA DEPARTMENT OF STATE

**PROFIT** 

Feb 18 1997 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # 394667 (0)CALTAX, INC. Principal Place of Business Mailing Address 2515 S.W. 8TH STREET 2515 S.W. 8TH STREET MIAMI FL 33135 MIAMI FL 33135-3005 3. Date Incorporated or Qualified 3a. Date of Last Report 01/24/1972 02/23/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-1378364 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 30 Florida Statutes 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PRETE, RICHARD **2515 S.W. 8TH STREET** 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33135** 84 City 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12. 13. ☐ DELETE Change Addition TITLE PRETE, CHARLES A, JR 1.2 NAME NAME 11370 NW 23RD STREET STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE PRETE, RICHARD C. NAME 2.2 NAME 8401 SW 53RD AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 00000 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE ■ Addition TITLE 3.1 TITLE PRETE, ANTHONY P 3.2 NAME NAME 8716 SPRING SHORE DR STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE, FL 00000 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE ANTONACCI, LAWRENCE P. 4. 2 NAME NAME 15962 SW 78 PL. STREET ADDRESS 4.3 STREET ADORESS MIAMI FL 4.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE PRETE, PAUL J NAME 5.2 NAME 12245 CROTON WAY STREET ADDRESS 5.3 STREET ADDRESS COOPER CITY FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 61 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-7IP 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.

**FILED**