

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 411108

(4)

1. Corporation Name

ROSSI AND MALAVASI ENGINEERS, INC

Principal Place of Business

1615 FORUM PLACE
SUITE 4-E
W. PALM BEACH FL 33401
US

Mailing Address

1615 FORUM PLACE
SUITE 4-E
W. PALM BEACH FL 33401
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., Etc.

Suite, Apt., Etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SABERSON, ROGER G
70 SE 4TH AVE
DELRAY BEACH FL 33483-1514

3. Date of Incorporation or Qualification
10/19/1972

3a. Date of Last Report
04/28/1995

4. FEI Number
59-1416776

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

10. Name and Address of New Registered Agent

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 607.011, 607.012, and 607.013, 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 provisions of Sections 607.011, 607.012, and 607.013, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME PD
MALAVASI, SANTIAGO P.
STREET ADDRESS 1615 FORUM PLACE STE. 4-E
CITY, ST, ZIP WEST PALM BCH. FL

NAME VD
ANDERSON, ROBERT
STREET ADDRESS 1615 FORUM PLACE, STE. 4-E
CITY, ST, ZIP WEST PALM BEACH FL

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. PHONE

6. FAX

7. E-MAIL

8. FAX

9. STREET ADDRESS

10. CITY, ST, ZIP

11. PHONE

12. FAX

13. STREET ADDRESS

14. CITY, ST, ZIP

15. PHONE

16. FAX

17. STREET ADDRESS

18. CITY, ST, ZIP

19. PHONE

20. FAX

21. STREET ADDRESS

22. CITY, ST, ZIP

23. PHONE

24. FAX

25. STREET ADDRESS

26. CITY, ST, ZIP

27. PHONE

28. FAX

29. STREET ADDRESS

30. CITY, ST, ZIP

31. PHONE

32. FAX

33. STREET ADDRESS

34. CITY, ST, ZIP

35. PHONE

36. FAX

37. STREET ADDRESS

38. CITY, ST, ZIP

39. PHONE

40. FAX

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SANTIAGO MALAVASI, PRESIDENT

2/26/96 (407) 689-0554

CR2E034 (12/95)

PM 3-26-1996