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Feb 04 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 446987 (0)

1. Corporation Name  
BOETTO CORPORATION

Principal Place of Business

33243 BINT IBN LANE  
SORRENTO FL 32776

Mailing Address

33243 BINT IBN LANE  
SORRENTO FL 32776



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1974

4. FEI Number

59-6521889

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 23925 Wolf Branch Rd 27 23925 Wolf Branch Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Sorrento FL

28 Sorrento FL

24 Zip

Country

29 Zip

Country

32776

USA

32776

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOETTO, DOMINIC  
33043 BINT IBN LANE  
SORRENTO 32776

81 Name

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

23925 Wolf Branch Rd

83

84 City

Sorrento

FL

85 Zip Code

32776

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
STD  
BOETTO, EUNICE  
33043 BINT IBN LANE  
SORRENTO, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
THURSTON, LAURA  
33243 BINT IBN LANE  
SORRENTO, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
BOETTO, DOMINIC  
33043 BINT IBN LANE  
SORRENTO, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
BOETTO, JEFF  
162 LAKE AVE  
LONGWOOD FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
BOETTO, STEVE  
162 LAKE AVE  
LONGWOOD, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
Boetto, Eunice  
23925 Wolf Branch Rd  
Sorrento, FL 32776

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
Boetto, Laura  
23919 Wolf Branch Road  
Sorrento, FL 32776

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
Boetto, Dominic  
23925 wolf Branch Road  
Sorrento, FL 32776

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
Boetto, Jeff  
206 Hazelwood Court  
Winter Spgs FL 32708

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

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.

SIGNATURE:

Laura Boetto 1/28/98 352-383-3581

CR2E034 (10/97)