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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

Principal Place of Business   Malling Address   Address   DO NOT WRITE IN THIS SPACE	E.P. GIULIANO CONSTRUCTION, INC.						
APPLICATIONN RD   DELRAY BOH FL 3345   DO NOT WRITE IN THIS SPACE	Principal Place of Purkage						
DELRAY BCH FL 33445  DELRAY BCH FL 00000  DELRAY BCH FL 00000  DELRAY BCH FL 00000  DELRAY BCH, FL 000000  DELRAY BCH, FL 000000  DELRAY BCH, FL 000000	,						
2. Principal Place of Business					DO NOT WRITE IN THIS SPACE		
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   21   26   Suite, Apt. #, etc.   Suite, Apt. #,							
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   59-1521496   Not Applicable   State   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   State   Suite, Apt. #, etc.   Suite, Ap							
Suite, Apt. #, etc.  Suite, Ap	2. Principal Plac	2a. Mailing Address					
Suite, Apri. 4, etc.    Suite, Apri. 4, etc.			— ×				
City & State						S8 75 Additional	
City & State			27				
Zip   Country   Zip   Country   Zip   Country   St. This corporation owes or has paid the current year intangible   Personal Property Tax due June 30.    Yes   No.   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent			City & State			6. Election Campaign Financing \$5.00 May Re	
Country   Zip   Country   Zip   Country   Zip   Country   Zip			28				
25   29   30   Personal Property Tax due June 30.   Yes   No		Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible	
9. Name and Address of Current Registered Agent  GIULIANO (E.P.) 4422 GERMANTOWN RD DELRAY BCH FL 33445  82 Street Address (P.O. Box Number is Not Acceptable)  83	24	25	29	30			
Addition  DELRAY BCH FL 33445  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes. Bat City  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes. Bat City  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes be accepted 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  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TITLE  PD  MAME  GIULIANO, ERMINIO  13. STREET ADDRESS  CITY-ST-ZPP  DELRAY BCH, FL 00000  14. CITY-ST-ZPP  DELRAY BCH, FL 00000  14. CITY-ST-ZPP  DELRAY BCH, FL 00000  14. CITY-ST-ZPP  DELRAY BCH, FL 00000  22. NAME  GIULIANO, CATHERINE  22. NAME  GIULIANO, PETER  32. NAME  GIULIANO, PETER  32. NAME  GIULIANO, PETER  33. STREET ADDRESS  CITY-ST-ZPP  DELRAY BCH, FL 00000  14. CITY-ST-ZPP  DELRAY BCH, FL 00000  15. STREET ADDRESS  CITY-ST-ZPP  DELRAY BCH, FL 00000  16. Trange  Addition  NAME  GIULIANO, PETER  32. NAME  17. STREET ADDRESS  CITY-ST-ZPP  DELRAY BCH, FL 00000  17. ST-ZPP  DELRAY BCH, FL 00000  18. STREET ADDRESS  CITY-ST-ZPP  DELRAY BCH, FL 00000  19. Change  Addition  Addition  Addition  Addition  Addition  Addition  ALL TITLE  CITY-ST-ZPP  Change  Addition  Addition  ALL TITLE  CITY-ST-ZPP  Addition  ALL TITLE  CITY-ST-ZPP  Change  Addition  Addition  Addition  ALL TITLE  CITY-ST-ZPP  Addition  ALL TITLE  CITY-ST-ZPP  Addition  ALL TITLE  ALL TITLE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  ALL TITLE  ALL TITLE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIR		9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
4422 GERMANTOWN RD DELRAY BCH FL 33445  82 Street Address (P.O. Box Number Is Not Acceptable)  83 B4 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, 1 an familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and file if applicable. (NOTE Registered Agent signature required when reinstalling)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD DELRAY BCH, FL 00000  12. NAME  GIULIANO, ERMINIO  12. NAME  GIULIANO, ERMINIO  13. STREET ADDRESS  CITY-ST-ZP  DELRAY BCH, FL 00000  14. CITY-ST-ZP  DELRAY BCH, FL 00000  14. CITY-ST-ZP  DELRAY BCH, FL 00000  14. CITY-ST-ZP  DELRAY BCH, FL 00000  15. Change  Addition  NAME  GIULIANO, PETER  12. TITLE  13. Change  Addition  NAME  GIULIANO, PETER  14. TITLE  15. Change  Addition  NAME  GIULIANO, PETER  15. TITLE  16. Change  Addition  NAME  GIULIANO, PETER  16. TITLE  17. ST-ZP  DELRAY BCH, FL 00000  17. ST-ZP  DELRAY BCH, FL 00000  18. CHANGES  18. TITLE  19. Change  Addition  NAME  GIULIANO, PETER  19. Change  Addition  NAME  ALE HAME  ALE HAME  ADDITIONS (CHANGES TO CFICERS AND DIRECTORS IN 12  ADDITIONS (CHANGES	GIULI	IANO (E.P.)		1	II Name		
DELRAY BCH FL 33445    83   84   City   FL   85   Zip Code				-	Stroot Add	drops (B.O. Boy Number in Net Acceptable)	
83   84   City   FL   85   Zip Code					Z Street Add	diess (F.O. Box Multiper is Mot Acceptable)	
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, and face of printed name of registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, hybed or printed name of registered agent and fille if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  PD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  PD  OFFICERS AND DIRECTORS IN 12  ITILE  DELRAY BCH, FL 00000  14. CITY-ST-ZIP  TITLE  S  OFFICERS AND DIRECTORS IN 12  ITILE  OCHange  Addition  NAME  GIULIANO, CATHERINE  22. NAME  STREET ADDRESS  CITY-ST-ZIP  DELRAY BCH, FL 00000  23. STREET ADDRESS  CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  24. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  34. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  34. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  44. CITY-ST-ZIP  TITLE  ADDITIONS/CHANGES TO GENIER TO	DELI	ACT BOTTLE 33443		1	3		
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, and face of printed name of registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, hybed or printed name of registered agent and fille if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  PD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  PD  OFFICERS AND DIRECTORS IN 12  ITILE  DELRAY BCH, FL 00000  14. CITY-ST-ZIP  TITLE  S  OFFICERS AND DIRECTORS IN 12  ITILE  OCHange  Addition  NAME  GIULIANO, CATHERINE  22. NAME  STREET ADDRESS  CITY-ST-ZIP  DELRAY BCH, FL 00000  23. STREET ADDRESS  CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  24. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  34. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  34. CITY-ST-ZIP  TITLE  DELRAY BCH, FL 00000  44. CITY-ST-ZIP  TITLE  ADDITIONS/CHANGES TO GENIER TO	1			L			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Slatutes, the above-named corporation's this statement for the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agert and title if applicable.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PD				3	4 City	<b>□</b> 85 Zip Code	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstaling)  12. OFFICERS AND DIRECTORS	11 Pursuant to	the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the abo	ve-named cor	[	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstaling)  12. OFFICERS AND DIRECTORS	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						
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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	14. I hereby cert						

empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or truste Block 12 or Block 13 if changed, or on an attachment with

**FILED** 

Jan 28 1998 8:00am

Secretary of State