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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(0)

DOCUMENT # 519200
CAMARDO ENTERPRISES, INC.

	J	FILE)
Apr	16	1997	8:00am
Se	cre	tary (of State

Principal Place of Business 9532 HEMPEL COVE BLVD. WINDERMERE FL 34786 US		Mailing Address 9532 HEMPEL COVE BLVD. WINDERMERE FL 34786-8215 US			T 190104 91194 11410 18110 17311 98111 9846 BYBAT BYBA			
					3. Date Incorporated or Qualified 11/29/1976	3a. Date of L 04/25/19:		
	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.					Not Applicable	
22		27			5. Certificate of Status Desired		75 Additional be Required	
City & Stat	е	City & State			6. Election Campaign Financing	\$5	.00 May Be	
23		28	т		Trust Fund Contribution	Ad	ded to Fees	
Zip 24	Country Zip Country 25 29 30		У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Curren		1301	· - <u>-</u>	10. Name and Address of New Re			
	NANDEZ, WILLIAM W.		81	Name		<u> </u>		
49 NORTH ORANGE AVENUE			82 Stree		ddress (P.O. Box Number is Not Acceptable)			
ORL	ANDO FL]				
			83	'				
			84	City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	les, the abov		poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changi	ng its registered	
office or r agent. I a	registered agont, or both, in the State im f <mark>amiliar with, and accept the obli</mark> g	e of Florida. Such change was a ations of, Section 607.0505, Flo	authorized b orida Statut∈	y the corpora is.	tion's board of directors. I hereby accep	t the appointmer	it as registered	
SIGNATURE								
12.	Signature, typed or printed name of registered age	ort and liter't applicable (NO) DIRECTORS	Hagistered Ap	ent signatur, requ	red when revisating) ADDITIONS/CHANGES TO OFFIC	DATE	7000 11 40	
TITLE	PO	DELETE	1.1 10LE		ADDITIONS/CHANGES TO OFFIC	Cha		
NAME	CAMARDO, JOHN J.		1.2 NAME			23 016	ingo EJ Modition	
STREET ADDRESS	9532 HEMPEL COVE BLVD.			LADDRESS				
CITY-ST-ZIP	WINDERMERE FL		1.4 CHY-	S1-7IP				
TITLE	SO DOCEMBI	☐ OFLETE	2 1 701.6			Cha	nge Addition	
NAME	CAMARDO, ROSEANN 9532 HEMPEL COVE BLVD.				44			
STREET ADDRESS	WINDERMERE FL			T ADDRESS				
CITY-ST-ZIP TITLE	T	DELETE	2 4 CHY-	ST- 7IP				
NAME	CAMARDO, JOHN J.		32 NAME			L Chai	nge L_] Addition	
STREET ADDRESS	9532 HEMPEL COVE BLVD.			T ADDRESS				
CITY-ST-ZIP	WINDERMERE FL		3 4. CiTY-					
TITLE	***************************************	DECETE	4.1 THU			☐ Chai	nge Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY-ST-ZIP		httti	4.4 CITY - :	ST-7IP		П.		
TITLE NAME		L'I DETETE	5.1 TITLE			☐ Char	ige 🔝 Addition	
STREET ADDRESS			5.2 NAME	F ADDRESS				
CITY-ST-ZIP			5 4 City-5					
TITLE		DELETE	617011			Char	nge	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP		4 4 4 50 7	6.4 CITY - S	51-ZIF				
l am an of	n ⊪uucateo on <u>tais-ana</u> nai report or s	uppremental annual report is ti The receiver or trustee empow	rue and acci ered to exec	urale and that	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal 1 as required by Chapter 607, Florida St	offoot as if made	under eath, that I	