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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 525787

(8)

2a, Mailing Address

Suite, Apt. #, etc.

ANGELO J. TELESE INTERIORS, INC.

Principal Place of Business Mailing Address 7020 CENTRAL AVE 7020 CENTRAL AVE ST PETERSBURG FL 33707 ST PETERSBURG FL 33707

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FILED Feb 09 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualified

02/14/1977

59-1727039

5. Certificate of Status Desired

4, FEI Number

22		27	27			5. Certificate of Status Desired Fee Required
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23	28					Trust Fund Contribution
Zip	Country	Zip		intry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. X Yes No
	g. Name and Address of Cu	urrent Registered Agent		247	*1	10. Name and Address of New Registered Agent
ANDREWS, LANCE				81	Name	,
SUITE 1406 PLAZA TOWER 111 2ND AVENUE N.E. ST PETERSBURG FL 33701				82	Street Addre	ess (P.O. Box Number is Not Acceptable)
				63		
				63		
				84	City	85 Zip Code
				[1		FL 3 20 Code
office or r	to the provisions of Sections 607 egistered agent, or both, in the S im familiar with, and accept the c	State of Florida. Such change	was authorize	d by	the corporate	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTL: Registered Agent signature required when reinstating) DATE						
12.	Signature, typed or printed name of registers OFFICERS	ed agent and fille if applicable. S AND DIRECTORS	(NOTE: Hegistere	d Ager	ni per erulengia In	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELE		TLF		Change Addition
NAME	TELESE, ANGELO J	_ ,	1.2 N		ļ	
STREET ADDRESS	6700 5TH AVE N			1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		I -	ITY-ST		
TITLE	STD	DELE			1-74	Change Addition
NAME	VIHEREK, JOSEPH L		2.2 N	AME		
STREET ADDRESS	6700 5TH AVE N		2.3 \$	rree t	ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL		2.40	ITY-S	T-ZIP	
TITLE		DELE DELE				☐ Change ☐ Addition
NAME			32 N	AME	[
STREET ADDRESS			3.3 \$	REET	ADDRESS	
CITY-ST-ZIP			3 4. C	11Y - S	T - ZIP	
TITLE		DELETE 41		TLE		Change Addition
NAME			4.2 N	AME		
STREET ADDRESS			4.3 ST	REE1	ADDRESS	
CITY-ST-ZIP				TY-ST	r - 21P	
TITLE		DELE	TE 5.1 TI	TLE		☐ Change ☐ Addition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 \$1	REE1	ADDRESS	
CITY-ST-ZIP				TY- 51	r - ZUP	
TITLE		☐ DELE	TE : 61 TI	TL E		Change Addition
NAME			6.2 N/	ME		
STREET ADDRESS	•		6.3 ST	REE1	ADDRESS	
CITY-ST-ZIP			6.4 CI			
14. Thereby 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 suppliemental 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: Ungliat Ville ANGELO J. TELESE 1/29/98 813-301-183						