

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Hartum  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 MAY - 1 AM 9: 43

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # 526174 (8)**

1. Corporation Name  
**BIANCA'S, INC.**

Principal Place of Business Mailing Address  
**4400 NE 23RD AVE 4400 NE 23RD AVE  
LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 33064**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/10/1977** 3a. Date of Last Report **05/01/1994**  
4. FEI Number **59-1714754** 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**  
7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

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

10. Name and Address of New Registered Agent

**GERONAZZO, ROSEMARIE  
4400 NE 23RD AVE.  
LIGHTHOUSE POINT FL 33064**

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 607.0502 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 the registrant

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>V GERONAZZO, ROSEMARIE</b>	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>4400 N.E. 23RD AVENUE</b>	1 2 NAME	
STREET ADDRESS	<b>LIGHTHOUSE PT. FL</b>	1 3 STREET ADDRESS	
CITY - ST - ZIP		1 4 CITY - ST - ZIP	
TITLE	<b>P GERONAZZO, BIANCA</b>	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>4400 N.E. 23RD AVENUE</b>	2 2 NAME	
STREET ADDRESS	<b>LIGHTHOUSE PT. FL</b>	2 3 STREET ADDRESS	
CITY - ST - ZIP		2 4 CITY - ST - ZIP	
TITLE		3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY - ST - ZIP		3 4 CITY - ST - ZIP	
TITLE		4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY - ST - ZIP		4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, together with an address.

SIGNATURE: *[Signature]* **V.P.** **4/28/95 (407) 395-7303**  
Typed name and typed or printed name of signing officer or director