## 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 # TORFINO ENTERPRISES, INC.

(3)

## **FILED** Mar 26 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		
3500 FAIRLAN	NE FARMS RD	3500 FAIRLANE FARM	S RD		
3	N F1 -00414	3	14	DO NOT MIDITE IN THIS SPACE	
W PALM BCH	FL 33414	W PALM BCH FL 3341 US	14	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
		••		09/28/1978	
2. Principal P	lace of Business	2a. Mailing Address	· ·	4. FEI Number Applied For	
21		26		<b>59-1882342</b> Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional	
City & State	2	City & State		Fee Required	
23	,	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. 🔲 Yes 💹 No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
DETORFINO, NICHOLAS			81 Name		
	745 OTTER RUN		82 Street Ad	ldress (P.O. Box Number is Not Acceptable)	
04	KE WORTH FL 33467		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 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.					
office or re agent. I as	egistered agent, or both, in the Sta m familiar with, and eccept the obli	ite of Florida. Such change wa ligations of, Section 607.0505.	s authorized by the corpor Florida Statutes.	ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	•	•			
	Signature, typed or printed name of registered a		IOTE: Registered Agent signature req	<del></del>	
12.	PV OFFICERS A	ND DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	DETORFINO, NICHOLAS R		1.2 NAME		
STREET ADDRESS	11745 OTTER RUN		1.3 STREET ADDRESS	'	
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE	Change Addit	
NAME	DETORFINO, LISE H		2.2 NAME		
STREET ADDRESS	11745 OTTER RUN		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	The serve	2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addit	
NAME DESCET ADDRESS			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addit	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 DITY-ST-ZIP		
TITLE		DELETE	5.1 ITLE	☐ Change ☐ Additi	
NAME			5.2 AME		
STREET ADDRESS			5.3 TREET ADDRESS		
CITY-ST-ZIP		·	5 · ITY - ST - ZIP		
TITLE		DELETE	6.1 ITLF	☐ Change ☐ Addit	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 supplomental 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 truffice 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 or an attachment with an address.

561-790-0111