

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 604850 (8)

1. Corporation Name

RALPH M. GUITO JR., P.A.



Principal Place of Business

315 E. MADISON ST., SUITE 1004
SUITE 901
TAMPA FL 33602

Mailing Address

315 E. MADISON ST., SUITE 1004
SUITE 901
TAMPA FL 33602

2. Principal Place of Business

2a. Mailing Address

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26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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27

City & State

City & State

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Zip

Country

Zip

Country

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3. Date Incorporated or Qualified

12/07/1973

3a. Date of Last Report

04/14/1995

4. FEI Number

59-1496525

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUI TO (RALPH M., JR.)
315 MADISON STREET
SUITE 1004
TAMPA FL 33602

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 title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GUITO, RALPH M. JR.
STREET ADDRESS 315 MADISON ST., #1004
CITY-ST-ZIP TAMPA FL

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1.1 TITLE ☐ Change ☐ Addition

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30.1 TITLE ☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 813-229-8407

CR2E034 (12/95)