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

. PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT #** 



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

1996

676793

(3)

1. Corporation Name ROBERT H. PETRUCCI, INC.  Principa' Place of Business Mailing Address  1701 NW 62 ND ST. 1701 NW 62ND ST. FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309					
US		US		3. Date hicorporated or Qualified 07/24/1980	3a. Date of Last Report 04/14/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1775557	Not Applicable
Suite, Apt. # 22	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip <b>24</b>	Country 25	Ζιρ <b>29</b>	Country 30	8. This corporation has liability for Florida Statutes  Yes	intangible tax under s. 199.032, ☐ No
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New F	egistered Agent
1500 S.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	CCI, EVELYN W. 5 CT.,BLDG.   #10G NO BCH. FL 33069  o the provisions of Sections 607.056 ad agent, or both, in the State of Flo h, and accept the obligations of, Se	irida. Such change was authorize	83  84 City  ss, the above named corpored by the corporation's boa	ress (P.O. Box Number is Not Acceptate.  Property of the pure of directors. The pure of directors. Thereby accept the appropriate of the appropria	FL 85 7ip Code
SIGNATURE _	Signature, types or printed name of registered age	int and title if applicable (N.?	PE Registered Agent signature require	d when renshabili	part
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME	dp Petrucci, Robert H	DELETE	1, 1 TITLE 1,2 NAME		Change Addition
STREET ADDRESS	2941 NW 112 AVE		1.3 STHEET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CHY SI - ZIP		
Trice	DST	DELETE	2 1 TITLE		Change Addition
NAME	PETRUCCI, EVELYN		2 2 NAMÉ		
STREET ADDRESS	2941 NW 112 AVE		2 3 STREET ADDRESS		
CITY+S1-ZIP TITLE	CORAL SPRINGS FL	DELETE	2.4 CITY - S1 - ZIP 3 1 TITLE		Change
NAME		[] Detter	3 7 111LF 3 2 NAME		Change 🔛 Addition
STREET ADDRESS			3.3 STHEFT ADDRESS		
City - St - ZiP			3.4 CiTY-ST-7IP		
TITLE		DELFTE	4 1 TOTLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY-ST-ZiP		E3 or or	4.4 CITY - S1 - ZIP		
TIFLE		DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME CONTRACTOR			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP TITLE		[] DELETE	54 C·TY - ST - ZiP 6 1 TiTLE	v	Change Addition
NAME		_ J beer re	6.2 NAME		□ ourside □ voougou
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
and the second s	certify that the information supplied	with this films is voluntarily furni		or the exemption stated in Section 119.	07(3)(k), Florida Statutes, Lifurther

certify that the information indicated on this annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Luly Gituuri
SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96 (954)772-2333