

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90015 042 ****70.00

DOCUMENT # 707565

1. Entity Name
CORONET PLAZA INC A CONDOMINIUM



Principal Place of Business
**2316 JACKSON ST
3
HOLLYWOOD, FL 33020-4978 US**

Mailing Address
**16 DELLORO ST
3
WEST HAVERSTRAW, NY 10993 US**



01112008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0161790

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**D'ASSISI, CARMELO
2316 JACKSON ST
APT 4
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BISHOP, ADN 2316 JACKSON ST #5 HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANZONE, JOSEPH 2316 JACKSON ST. #6 HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD D'ASSISI, JOSEPH 2316 JACKSON ST. #10 HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel S. Bishop (DANIEL BISHOP) 2/27/08 954-920-5464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40058683

707565

Coronet Plaza Inc.

16 Delloro Street

West Haverstraw, New York 10993

845-429-8655

March 26, 2008

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Ref#: 707565

To Whom it May Concern:

Enclosed please find the correct check amount for our nonprofit annual report for \$61.25, along with the \$8.75 for the certificate of status.

Please note that the signature on the document is correct. Dan Bishop is the President listed for the Corporation. Unfortunately we did not see that the form has reversed two letters in his first name. It should read Bishop, Dan not Bishop, Adn.

I hope this clears up any issues. If there are any more questions please contact me at the above address and/or phone number.

Thank you,

Carmelo D'Assisi

Carmelo D'Assisi
Secretary/Treasurer

CD
3/27/08
c:report08.ltr