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May 27 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra Br. Wortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F82084

(7)

1. Corporation Name  
DI ANNO'S, INC.

Principal Place of Business  
308 NORTH FEDERAL HIGHWAY  
HALLANDALE FL 33009

Mailing Address  
21175 MAINSAIL CIRCLE E-13  
SUITE E-13  
AVENTURA FL 33180-3509  
US



2. Principal Place of Business\*

21 21175 MAINSAIL CIR

22 E-13

23 AVENTURA FL

24 33180

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified  
05/19/1982

3a. Date of Last Report  
05/01/1996

4. FEI Number  
59-2200701

Applied For  
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$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

HUNT, DIANNE C.  
21175 MAIN SAIL CIRCLE  
SUITE E-13  
AVENTURA FL 33180

10. Name and Address of New Registered Agent

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: *Dianne C. Hunt*

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

(NOTE: Registered Agent signature required when reinstating)

DATE: 4/25/97

12. OFFICERS AND DIRECTORS

TITLE: PD  
NAME: HUNT, DIANNE C  
STREET ADDRESS: 21175 MAIN SAIL CIR., SUITE E-13  
CITY-ST-ZIP: AVENTURA FL 33180

TITLE: VT  
NAME: CARINO, HELEN  
STREET ADDRESS: 550 NE 101ST ST  
CITY-ST-ZIP: MIAMI FL

TITLE: PD  
NAME: HUNT, JAMES  
STREET ADDRESS: 21175 MAIN SAIL CIRCLE  
CITY-ST-ZIP: AVENTURA FL 33180

TITLE: D  
NAME: CARINO, HELEN  
STREET ADDRESS: 550 NE 101ST ST  
CITY-ST-ZIP: MIAMI FL

TITLE: ☐ DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE: ☐ DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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: *Dianne C. Hunt*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 4/24/97 305  
DAYTIME PHONE: 937 0997

CR2E034 (9/96)