## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998

GIANNETTI, RICK

23

24

10年 計画の記載の行行

100

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name F93000001299 (7)

9. Name and Address of Current Registered Agent

GIANNETTI CONTRACTING CORPORATION

Principal Place of Business	Mailing Address 6340 SIMS DRIVE STERLING HEIGHTS MI 48313	DO NOT WRITE IN THIS SPACE		
8340 SIMS DRIVE STERLING HEIGHTS MI 48313				
		3. Date Incorporated or Qualified 03/09/1993		
2. Principal Place of Business	2a, Mailing Address	4. FEI Number	Applied Fo	
21	26	38-2477625	Not Applica	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additiona Fee Required	
City & State	City & State	& Floatice Compaign Financian	\$E 00	

4371 NW 19 AVE 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33064 63 Zip Code

Country

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. I a	egistered agent, or both, in the state of ribridal such charigh m familiar with, and accept the obligations of, Section 607.0	505, Florida Statutes.	orporation's poard of directors. Thereby accept the appoi	intiment as i	registered
SIGNATURE	Signature, typod or profed name of registered agent and title if applicable	(NOTE: Registered Agent signatu	ure required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND E	DIRECTOR	S IN 12
TITLE	P DELE	TE 1.1 TITLE		Change	Addition
NAME	GIANNETTI, RICK	1.2 NAME	ľ		
STREET ADDRESS	4371 NW 19 AVE	1.3 STREET ADDRESS	s		
CITY-ST-ZIP	POMPANO BEACH FL 33064	1.4 CITY-ST-ZIP			
TITLE	VP DELE	TE 2.1 TITLE		Change	Addition
NAME	GIANNETTI, FRANK	2.2 NAME			
STREET ADDRESS	6340 SIMS DR	23 STREET ADDRESS	s		
CITY-ST-ZIP	STERLING HEIGHTS FL 48313	2. 4 CITY-ST-ZIP			
TITLE	DELE	TE 3.1 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS	s		
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	□ DELE	TE 4.1 TITLE		Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS	S		
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TATLE	DELE	TE 51 TITLE		Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS	s i		
CITY-ST-ZIP		5.4 CITY - ST - ZIP	<u> </u>		
TITLE	☐ DELE	TE 6.1 TITLE		Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS	s		
City-St-ZiP		6.4 C/TY - ST - Z/P			

14. Thereby 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.

Rick Gianneti, President 4/1/98 954-978-0211

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees

**FILED** 

Apr 14 1998 8:00am

Secretary of State

This corporation owes or has paid the current year Intangible

Trust Fund Contribution

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent