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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1998 **DOCUMENT** # F93000002057 (8) EASTWIND CAPITAL CORP. Mailing Address Principal Place of Business C/O JOHN P. O'DONNELL. P.C. C/O JOHN P. O'DONNELL. P.C. 130 WATER STREET 130 WATER STREET DO NOT WRITE IN THIS SPACE NEW YORK NY 10005-1621 NEW YORK NY 10005-1621 3. Date Incorporated or Qualified 04/30/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 26 13-3534083 Not Applicable 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zip Personal Property Tax due June 30. Yes 25 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name TOTOLOS, DENISE 10128 A US HIGHWAY 19 Street Address (P.O. Box Number is Not Acceptable) PORT RICHEY FL 34668 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. s dinaming registered agent and the filepole able (NOTE Fir:gistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change T Addition O'DONNELL, JOHN P NAME 1.2 NAME 130 WATER STREET STREET ADDRESS 1.3 STREET ADDRESS NEW YORK NY 10005-1621 1.4 CITY-ST-ZIP CITY-ST-2IP DELFTE Change Addition TITLE 21 TITLE VOUTSINAS, SPIROS J. NAME 22 NAME 2425 SURF DRIVE STREET ADDRESS 2.3 STREET ADDRESS **BELLMORE NY** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3 1 1(1). TITLE MILONAS, SPIROS 3.2 NAME NAME 1790 BROADWAY 3.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10019** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAMÉ 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 51 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6 1 TITLE Change Addition

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 suppliemental 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 trusted 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 once attrichment with an address.

SIGNATURE:

6.2 NAME

63 STREET ADDRESS 6.4 City-St-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

**FILED** 

Mar 10 1998 8:00am