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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F9500001003 (1)

IL CAVALLINO, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						—	ACTO IN SIN P		
3500 MYSTIC POINTE DR 3500 MYSTIC POINTE DR TOWER 400-APT 2702 TOWER 400-APT 2702									
MIAMI BEACH	FL 33160		MIAMI BEACH FL 33180				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
2. Principal Pla	ace of Business	2a. Mail	ing Address				03/02/1995 4. FEI Number		and at F
21		— <u>—</u>	26				NOT APPLICABLE	<u> </u>	pplied For lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			· · ·	•		Additional
22		27	27				5. Certificate of Status Desired		lequired
City & State		City	City & State				6. Election Campaign Financing	\$5.00) May Be
23		28					Trust Fund Contribution		to Fees
Zip	Country	Zip		Cour	ntry		8. This corporation owes or has paid the		
24	9. Name and Address of Cur	29	Acest	30			Personal Property Tax due June 30.		No
DA16		tent negistered	Agent		81	Name	10. Name and Address of New Registere	d Agent	
	KELS, STEVEN L			L		Ivallie			
301 YAMATO ROAD, STE 4150 BOCA RATON FL 33431					82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
B00	A NATON PL 33431			ŀ	83				
				Ţ.	84	City		85 Zip	Code
11. Pursuant to	the provisions of Sections 607.	0502 and 607 15	08. Florida Statute	s the ab	DOVA:	-named corn	Poration submits this statement for the purpose	of changing i	ite regietered
office or re	gistered agent, or both, in the St	ate of Florida Su	ich change was ar	uthorized	by	the corporat	tion's board of directors. I hereby accept the a	ppointment as	s registered
	riaminal with the decept the or	ingrition's or, Sec.	non 607.0303, Fioi	nua Siait	J162.	•			
SIGNATURE _	Ignature, typed or printed name of tegistered	l agent and little if apply	able (NOTE	Registered	Agen	nt signature require	red when reinstating) DATE		
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PCD		☐ DELETE	1.1 7(1)	LE			☐ Change	Addition
NAME	GIOVANELLI, WALTER			1.2 NA	ME	İ			
STREET ADDRESS	301 YAMATO RD., #301		1.3 STREET ADDRESS			NDDRESS .			ļ
CITY-ST-ZIP	BOCA RATON FL		DELETE	1.4 CIT		- ZIP			
TITLE			DELETE	2.1 TITL				Change	☐ Addition
NAME STREET ADDRESS				2.2 NAN					
				1		ADDRESS			J
CITY-ST-ZIP TITLE			DELETE	2 4 CIT 3 1 TITL		I - ZIP	1 .	Change	☐ Addition
NAME				3 2 NAM				Change	LI AUGILION
STREET ADDRESS						NDDAESS			
CITY-ST-ZIP				3.4. CIT		į.			ļ
TITLE		·	DELETE	4.1 TITL		F-11		Change	Addition
NAME				4. 2 NAI	ME				
STREET ADDRESS						DDRESS			
CITY-ST-ZIP				4.4 CITY	Y - ST -	- ZIP			į
TITLE			DELETE	5.1 TITL				☐ Change	☐ Addition
NAME				5.2 NAM	ME				
STREET ADDRESS				5.3 STR	EET A	DORESS			
CITY-ST-ZIP				5.4 CITY	Y-ST-	- ZIP			
TITLE			DELETE	6.1 TITL	.E			Change	Addition
NAME				6.2 NAW	AE.				
STREET ADDRESS				6.3 STA	EET A	DDRESS			
CITY-ST-ZIP	SI 5		$\overline{}$	6.4 CITY	Y-ST-	ZIP			
14. I hereby ce	rtity that the information supplied	t with this filing of	oes not qualify for	the exer	nptic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information