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Mar 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000000703 (6)

1. Corporation Name
CICERELLO, INC.

Principal Place of Business
13551 MCGREGOR BLVD.
FT. MYERS FL 33919

Mailing Address
13551 MCGREGOR BLVD.
FT. MYERS FL 33919-6044



3. Date Incorporated or Qualified 02/12/1996
3a. Date of Last Report

2. Principal Place of Business
21 13551 mc Gregor Blvd
22 Suite, Apt. #, etc.
23 City & State Ft. Myers
24 Zip 33919
25 Country USA
26 13551 mc Gregor Blvd
27 Suite, Apt. #, etc.
28 City & State
29 Zip 33919
30 Country Lee

4. FEI Number 36-3102468
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
CICERELLO, ANTHONY
13551 MCGREGOR BLVD.
FT. MYERS FL 33919

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

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 Anthony Cicerello
Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE 3-6-97

12. OFFICERS AND DIRECTORS
TITLE P
NAME CICERELLO, ANTHONY
STREET ADDRESS 13551 MCGREGOR BLVD.
CITY-ST-ZIP FT. MYERS FL 33919
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
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CITY-ST-ZIP
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 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: Tony Cicerello
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 3/6/97 Daytime Phone # 941-481-8324

CR2E034 (9/96)