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**PROFIT** CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

G06997

(2)

| THE STACOLE COMPANY, INC.   |   |   |                               |                                |  |   |                                     |   |
|---|---|---|-------------------------------|--------------------------------|--|---|-------------------------------------|---|
| Principal Place of Business Mailing Address   |   |   |                               |                                |  | - I 1801KH 80H 83H 83H 81H 10K 8  |                                     | 811 81814 81814 <b>188</b> 1            |
| 1082 SOUTH ROGERS CIRCLE 1082 SOUTH ROGERS CIR<br>BOCA RATON FL 33487 BOCA RATON FL 33487 |   |   |                               |                                |  |   |                                     |   |
|   |   |   |                               |                                |  | 3. Date Incorporated or Qualified 11/02/1982  | 3a. Date of Las<br>03/02/1          | ,                                       |
| 2. Principal Place of Business 2a. Mailing Address  |   |   |                               |                                |  | 4. FEI Number   | <u> </u>                            | Applied For                             |
| 21  | 26  |   |                               | 59-2310892                     |  | Not Applicable  |                                     |   |
| Suite, Apt. #, etc.  Suite, Apt. #, etc.  |   |   |                               |                                |  | 5. Certificate of Status Desired  |                                     | 75 Additional                           |
| City & State  | City & State  | State   |                               |                                | 6 Election Compaign Financing          | r   | se Required                         |   |
| 23  |   |   |                               |                                |  | <b>6.</b> Election Campaign Financing Trust Fund Contribution                       |                                     | .00 May Be                              |
| Zip Country   |   | Zip Country   |                               |                                | 8. This corporation has liability or i |   |                                     |   |
| 24  | 25  | 29  | 30                            |                                |  | Florida Statutes Yes  |                                     | , o 100.00E,                            |
| ~   | 9. Name and Address of Currer   | nt Registered Agent   |                               |                                |  | 10. Name and Address of New R   | egistered Agent                     |   |
|   |   |   |                               | 81                             | Name                                   |   |                                     |   |
| LANO, ANTHONY<br>1082 SOUTH ROGERS CIRCLE<br>BOCA RATON 33487                             |   |   | ŀ                             | 82                             | Street Addre                           | dress (P.O. Box Number is Not Acceptable)   |                                     |   |
|   |   |   | -                             |                                |  |   |                                     |   |
| BOCA K  | AION 33487  |   | ľ                             | 83                             |  |   |                                     |   |
|   |   |   | Ī                             | 84                             | City                                   |   | 85                                  | Zip Code                                |
| U sugiste   | to the provisions of Sections 607.0502<br>red agent, or both, in the State of Florid<br>th, and accept the obligations of, Sect   | ua. Such Change was autron  | izea by the co                | /e-na<br>orpo                  | amed corpora<br>ration's board         | tion submits this statement for the pur<br>I of directors. I hereby accept the appo | pose of changing intract as registe | ts registered office<br>red agent. I am |
| SIGNATURE   | , •   |   |                               |                                |  |   |                                     |   |
|   | Signature, typed or printed name of registered agent  |   |                               | \gent :                        | signature required                     |   | DATE                                |   |
| 12.   | OFFICERS AN   | OFFICERS AND DIRECTORS  DELETE                                    |                               | 13.                            |  | ADDITIONS/CHANGES TO OFFI   |                                     |   |
| NAME  | LANO, CHRISTOPHER   | <del>-</del>  |                               | 1. 1 TITLE                     |  |   | ☐ Chan                              | ge                                      |
| STREET ADORESS  | 1566 S.W. 7TH AVENUE.   |   |                               | 1.2 NAME<br>1.3 STREET ADDRESS |  |   |                                     |   |
| CITY-ST-ZIP   | BOCA RATON, FL 00000  |   |                               | 1.4 CITY - ST - ZIP            |  |   |                                     |   |
| TITLE   | PD  | DELETE 2.1  |                               |                                | 2"                                     |   | Chang                               | e Addition                              |
| NAME  | LANO, ANTHONY   |   | 2.2 NAM                       | 2.2 NAME                       |  |   |                                     | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| STREET ADDRESS  | 2910 N.W. 28TH TERRACE.   |   | 2.3 STR                       | 2.3 STREET ADDRESS             |  |   |                                     |   |
| CITY-ST-ZIP   | BOCA RATON, FL 00000  | BOCA RATON, FL 00000  |                               | 2 4 CITY- ST-ZIP               |  |   |                                     |   |
| TITLE   |   |   | 3 1 117                       | 3 1 TITLE                      |  |   | Chang                               | ge Addition                             |
| NAME  | LANO, GLADYS  |   | 32 NAM                        | 32 NAME                        |  |   |                                     |   |
| STREET ADDRESS  | 2910 N.W. 28TH TERRACE.   |   | 3.3 STREET ADDRESS            |                                | DDRESS                                 |   |                                     |   |
| CITY-ST-ZIP   |   |   |                               | 3.4 CITY-S1-ZIP                |  |   |                                     |   |
| TITLE   |   |   | 4.1 7/7                       |                                |  |   | Chang                               | e 🔲 Addition                            |
| NAME<br>STREET ADDRESS  | ·   |   | 4.2 NAN                       |                                |  |   |                                     |   |
| CITY-ST-ZIP   |   |   |                               |                                | DORESS                                 |   |                                     |   |
| TITLE   |   | DELETE  | 4.4 CITY<br>5. 1 TITE         |                                | ZIP                                    |   |                                     | a Addition                              |
| NAME  |   | <u></u>   | 5.2 NAN                       |                                |  |   | ☐ Chang                             | e 🔲 Addition                            |
| STREET ADDRESS  |   |   | 5.2 NAR                       |                                | DORESS                                 |   |                                     |   |
| DITY-ST-ZIP   |   |   | 54 CITY-                      |                                |  |   |                                     |   |
| TITLE   |   |   |                               | 6 1 TITLE                      |  |   | Chang                               | e Addition                              |
| NAME  |   |   | 6.2 NAN                       | 6.2 NAME                       |  |   |                                     | <del>_</del>                            |
| STREET ADDRESS  |   |   | 6.3 STR                       | EET AC                         | DDRESS                                 |   |                                     |   |
| CITY-ST-ZIP   |   |   | 6.4 CITY                      | -12-                           | ZIP                                    |   |                                     |   |
| oath; that I  | y certify that the information supplied v<br>the information indicated on this annu<br>am an officer or director of the corpor<br>Block 12 or Block 13 if changed, or o | al report or supplemental and<br>ration or the receiver or truste | nual report is<br>ee empowere | true                           | and accurate                           | and that my cianatura chall have the r  | anno local offect o                 | s if pacedo un des                      |

SIGNATURE: \_

CHRISTOPHER LAND VID 3-15-96 407-998-0029

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTOPHER LAND VID 3-15-96 407-998-0029