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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G23959

(1)

PEROLI CORPORATION

Principal	Piace	of	B usiness				

Mailing Address

FILED May 02 1997 8:00am Secretary of State



2110 SW 12711 MIAMI FL 3317		2110 SW 1271H COURT MIAMI FL 33175-1444							
					3. Date Incorporated or Qualified 02/11/1983	3a. Date of Last 06/14/1996			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4, FEI Number	1,	Applied For		
212		26	26		59-2352973		Not Applicable		
Suite, Apt. #, etc.		Stirte, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required			
City & State		Cily & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fecs			
Zip	Country	Zip	Coun	try	8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	[30]	Florida Statutes Yes No 10. Name and Address of New Registered Agent					
01.6	9. Name and Address of Curre	int Registered Agent		Name	10. Name and Address of New Rec	Jistered Agent			
	/A, JULIAN			Ivanic					
2110 SW 127TH COURT MIAMI FL 33175					Street Address (P.O. Box Number is Not Acceptable)				
			1	33					
			1	34 City		FL 85 Zi	p Code		
office or re	o the provisions of Sections 607.05 agistered agent, or both, in the Stat in familiar with, and accept the obli	e of Florida. Such change was	authorized	by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing at the appointment a	its registered as registered		
SIGNATURE	<u> </u>			· · · · · · · · · · · · · · · · · · ·					
12.	Signature, typed or printed hance of registered a OFFICERS AI	ND DIRECTORS (NO	13.	Agent's grature requ	Ted whon remeating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	DRS IN 12		
TITLE	P8	DELETE	1.1 101	ŧ.	7100101010101110	Change			
NAME	OLIVA, JULIAN		1.2 NAA	Λ Ε					
STREET ADDRESS	2110 SW 127TH COURT		1.3 STR	EET ADDRESS			[[
CITY-ST-ZIP	MIAMI FL		1.4 001	r - \$1 - ZIP) }		
TITLE	P	DELETE	2.1 1111	E		Change	Addition C		
NAME	OLIVA, JULIAN		2.2 NAM	AE			į		
STREET ADDRESS	4441 W. FLAGLER ST., #3		2.3 STR	FLT ADDRESS					
CITY-ST-ZIP	MIAMI FL		2 4 CH	Y - ST - 7IP					
TITLE		☐ DELETE	31111	.E		Change	e 🔲 Addition		
NAME			3.2 NAM	AE					
STREET ADDRESS			3 3 S1H	EET ADDRESS					
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TITLE		☐ DELETÉ	4.1 Till	·		Change	e [] Addition		
NAME			4. 2 NA						
STREET ADDRESS				EET ADDRESS					
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TITLE NAME			5.1 111) 5.2 NAM			L Change	, CJ Addition		
STREET ADDRESS			1	EET ADDRESS			\		
CITY-ST-ZIP TITLE		DELETE	6.1 TITE	Y-ST-7IP		☐ Change	e Addition		
NAME		E3 section	6.2 NA						
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP			1	Y-\$1-71P			ì		
OILL-OI-FIE			0.4 011						

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.