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

PROFIT
CORPORATION
ANNUAL REPORT
1998

一種をものでは、



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation	MENT # G2522 NUTO ENTERPRISES, INC.	· - /					
Principal Place of Business Mailing Address					-	81811 81811 81811 81811 8 11	DIA DIQA 1881
270 PALM COAST PARKWAY 270 PALM COAST PARKWA							
PALM COAST FL 32137 PALM COAST FL 32137				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	IT IT IS SPACE	
					02/23/1983		İ
2. Principal Place of Business 2a. Mailing A		2a. Mailing Address	dress		4. FEI Number	I IA	pplied For
21 26		26			59-2291510	 	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			T	Additional	
22		27		6. Certificate of Status Desired	Fee F	tequired	
City & State		City & State		6. Election Campaign Financing		May Be	
23] Zip	Country		Country		Trust Fund Contribution		to Fees
24	Country Zip 29		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		
24	9. Name and Address of Curre		[30]		10. Name and Address of New Regi		
RFI	NVENUTO, ANTONIO		81 N	ame		•	
43 FILBERT LN.			82 St	rock Addro	no (D.O. Day Ni, makes in Net Assentable		
PALM COAST FL 32137			162 31	reet Addre	ss (P.O. Box Number is Not Acceptable	;)	
			83				
			84 C	11,		85 Zip	Code
				•		FL	
11. Pursuant to office or reagent. I as	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was a pations of, Section 607.0 <mark>505</mark> , Fl	es, the above-na authorized by the orida Statutes.	med corpo corporation	oration submits this statement for the pur on's board of directors. I hereby accept	rpose of changing the appointment as	its registered s registered
SIGNATURE							
	Signature, typed or printed name of registered agent and title if applicable (NOTE: OFFICERS AND DIRECTORS		f: Registered Agent sig	nature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DIDECTO	DC IN 10
12.	PD	DELETE	13.	172		Change	Addition
NAME	BENVENUTO, ANTONIO		1.2 NAME	BEA	SVENUTO, ANTONIO		
STREET ADDRESS	43 FILBERT LN.		1.3 STREET ADDI	iess 24	O PARKVICW DRIVE LM COAST FL 32		
CITY-ST-ZIP	PALM COAST FL		1.4 CITY - ST - ZIF	TA	LM LOAST EL 32	164	
TITLE	D	DELETE	2.1 TITLE			☐ Change	Addition
NAME	PASCAZIO, VITO	vrto :		1			ĺ
STREET ADDRESS	74 FLAMINGO DR.		2.3 STREET ADDR	RESS			
CITY-ST-ZIP	PALM COAST FL		2. 4 CITY - ST - ZII	<u> </u>			
TITLE	☐ DELÉTE		3.1 1ft LE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDR	ESS			ĺ
CITY-\$1-ZIP			3.4. City - ST - ZII	<u>`</u>			
TITLE		DELETE	4.1 TITLE			L] Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR				J
CITY - ST - ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE			Change	Addition
NAME		_ J DELETE	5.2 NAME			change	CJ AGOIRON
STREET ADDRESS			5.3 STREET ADDE	itee]
CITY-ST-ZIP			5.4 CITY - ST - ZIP				
TITLE		DELETE	6.1 TITLE	_		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDR	ESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

14. I 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 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 on an attachment with an address.

SIGNATURE: A tomin Boundary HE (ANTONIO READERNITO) 1/21/98 (904)/11590611