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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G36336**

(7)

1. Corporation Name:

R. GOVERNATORE, INC.



Principal Place of Business

% FRANK GALLUCCI
1050 N.W. 1ST AVENUE
BOCA RATON FL 33432

Mailing Address

% FRANK GALLUCCI
1050 N.W. 1ST AVENUE
BOCA RATON FL 33432

3. Date Incorporated or Qualified
04/29/1983

3a. Date of Last Report
01/31/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GALLUCCI, FRANK
2 BELAIR DRIVE
BOYNTON BEACH FL 33435

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of person or printed name of registered agent and if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
GALLUCCI, FRANK
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME
VIGNAU, TERESA
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME
VIGNAU, TERESA
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME
VIGNAU, TERESA
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
VIGNAU, TERESA
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
VIGNAU, TERESA
STREET ADDRESS
7 BELAIR DR.
CITY-ST-ZIP
BOYNTON BEACH FL

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

TITLE ☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or changed, or on an attachment with an address.

SIGNATURE:

Frank Gallucci
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK GALLUCCI

1/31/96

392 6677

Date Daytime Phone #

CR2E034 (12/95)