

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

FILED
Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G68862 (3)
1. Corporation Name
RIZZOTTO CONSTRUCTION, INC.



Principal Place of Business 1824 VILLA DR. #22 CLEARWATER FL 34620	Mailing Address 1824 VILLA DR. #22 CLEARWATER FL 34620-1412
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2. Principal Place of Business 21 13924 OAKFOREST Suite, Apt. #, etc. 22 BLVD. SOUTH City & State 23 SEMINOLE FL. Zip 24 33776		2a. Mailing Address 26 13924 OAKFOREST Suite, Apt. #, etc. 27 BLVD. SOUTH City & State 28 SEMINOLE FL. Zip 29 PINELLAS Country 25 USA		3. Date Incorporated or Qualified 11/14/1983		3a. Date of Last Report 02/16/1996	
4. FEI Number 59-2373326		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent RIZZOTTO, EDWARD G. 1194 RIDGECREST CT. PALM HARBOR FL 34683				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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P RIZZOTTO, GINO 1194 RIDGECREST CT. PALM HARBOR FL	1.1 TITLE	PRESIDENT EDWARD G. RIZZOTTO 1194 RIDGECREST CT. PALM HARBOR FL 34683
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VP RIZZOTTO, MARK J 13924 OAKFOREST BLVD. SO. SEMINOLE FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S RIZZOTTO, ARLENE 13924 OAKFOREST BLVD. SO SEMINOLE FL	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	T RIZZOTTO, EDWARD G 1194 RIDGECREST COURT PALM HARBOR FL	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 _____ DATE 4-14-97 (93) 5-9-97

CR2E034 (9/96)