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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

TOSTI'S, INC.

(8)

FILED Mar 12 1998 8:00am Secretary of State

]								
Principal Place of Business Mailing Address							I DODIEN EITH DAN DAN AND FOR THE UNION CAN BIGH BIGH BIGH BIGH BIGH BIGH	
726 OCEAN DUNES CIR. JUPITER FL 33477			726 OCEAN DUNES CIRCLE JUPITER FL 33477				DO NOT WRITE IN THIS SPACE	
US		U	J\$				3. Date Incorporated or Qualified	1
1							04/23/1985	ı
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For	ļ
21			26				59-2533951 Not Applicable	
Suite, Apl. #, etc.		27					5. Certificate of Status Desired See Required Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	28	7ip Country				This corporation owes or has paid the current year Intangible	ĺ
24	25 29			30		,	Personal Property Tax due June 30. Yes No	ĺ
g, Name and Address of Current I							10. Name and Address of New Registered Agent	
TO	STI, JOANNE HIDALGO	=	· ———————————————————————————————		81	Name		ĺ
726 OCEAN DUNES CIRCLE					82	Street Addr	dress (P.O. Box Number is Not Acceptable)	
JIPITER FL 33477					83			
 					84	City	85 Zip Code	
							FL (**)	
11. Pursuant office or r agent 1 a	to the provisions of Sections €07.050; egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 6 of Flori ations o	07.1508, Florida Statut da. Such change was f, Section 607,0505, Fl	es, the a authorize orida Sta	bove d by tute:	e-named corp y the corporati s.	oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE								ĺ
	Signature, typed or product name of registered injer OFFICERS ANI			E Registere	d Ago	ent signature require	red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	1
12.	VPD OFFICE AS ANI	N. L. MILLE	DELETE	1.1]	JI F		Change Addition	Š
KAME	TOSTI, JOANNE HIDALGO				AME	- }		١
STREET ADDRESS	726 OCEAN DUNES CIRCLE		Y			T ADDRESS		١٤
CITY-ST-ZIP	JUPITER FL					ST-ZIP		Š
TITLE			DELETE	2 1 TITLE			☐ Change ☐ Addition	ζ
NAME	TOSTI, GIACOMO		221		AME	}		ı
STREET ADORESS			23		TREET	r address		
CITY-ST-ZIP	JUPITER FL		2.4		:11Y-	ST-ZIP		
TITLE				3.1 11	TLE		Change Addition	ľ
RAME	TOSTI, JOANNE HIDALGO			3.2 N	3.2 NAME			ĺ
STREET ADDRESS	726 OCEAN DUNES CIRCLE		3.3 ST		TAFET	r address		
CITY-ST-ZIP	JUPITER FL			3.4. C	3.4. CITY-ST-ZIP			l
TITLE			DELETE	4.1 11	TLE.		Change Addition	
NAME				4.2 N	IAME	1		l
STREET ADORESS				4.3 S	THEET	ADDRESS		i
CITY-ST-ZIP				_		ST-ZIP		
TITLE			☐ DELETE	5.1 Ti		l	Change Addition	l
NAME				5.2 N.				
STREET ADDRESS						ADDRESS		ı
CITY-ST-ZIP			DELETE			37 - ZIP	[] ALANA [] 1.1391.	í
TITLE			☐ DELFTE	6.1 7			☐ Change ☐ Addition	1
NAME				6.2 N				!
STREET ADDRESS						ADDRESS		ı
CITY-ST-ZIP	portify that the information surrations will	th this f	ilina does not qualify to			ST-ZIP	Section 119.07(3)(i), Florida Statutes, I further certify that the information	ı
indicated	on this annual report or supplemental	annua	I report is true and acc	curate an	d tha	at my signatur	re 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

561-626-2025