SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CIGNATURE

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED **ANNUAL REPORT** Secretary of State **DIVISION OF CORPORATIONS** 1997 97 AUG -5 AN 9: OR **DOCUMENT # H55370** (1) SECRETARY OF STATE TALLAHASSEE, FLORIDA G. CIACCIO ENTERPRISES, INC. Principal Place of Business Mailing Address 8448-56TH ST. NORTH 8448-56TH ST. NORTH P.O. BOX 290331 P.O. BOX 290331 DO NOT WRITE IN THIS SPACE **TEMPLE TERRACE FL 33687 TEMPLE TERRACE FL 33687** 3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1985 07/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2530106 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes ☐ No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CIACCIO, GASPAR 8448 N 56TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) TEMPLE TERRACE FL 33617 R3 **B4** City Zip Code 85 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE CIACCIO, GASPAR CR2E034 NAME 1.2 NAME 8448 - 56TH STREET NORTH STREET ADDRESS 1.3 STREET ADDRESS TEMPLE TERRACE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 21 TITLE CIACCIO, JAMES NAME 2.2 NAME 8448 - 58TH ST N STREET ADDRESS 2.3 STREET ADDRESS **TEMPLE TERRACE FL** 2. 4 CITY - ST - ZIP CITY-ST-ZIP SELETE 3.1 TITLE 15 Change __ Addition TITLE NAME CIACCIO, STEVEN P. 3.2 NAME 08/08/97-5 08/08/97-5 *****165.00 -006 8448 - 56TH STREET NORTH STREET ADORESS 3.3 STREET ADDRESS *****165.00 TEMPLE TERRACE FL CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET_ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME's 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-\$1-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filling 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 supplier ental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the occiver or trueffer enhancement to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed the property of an although the interest and the property of the corporation or the occiver or trueffer enhancement of the occiver or trueffer enhancement of the occiver of the occiver of the occiver or trueffer enhancement of the occiver of the occive

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SPECIALTY WINE & LIQUOR

July 28, 1997

Please find the enclosed copies of my Annual Report for 1997: Document # H55370 and Document # M71674.

I did not receive my first copy of the above listed items. Is there any possibility that you would waive the late fee, due to the fact that I did not receive that first notice? Please check my past filings for prompt payments.

Thank you in advance, and enclosed please find my checks for \$ 165.00 for each corporation. If you have any questions, please call me.

Sincerely

Jimmy /Ciaccio