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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H57132

1. Corporation Name

NERO'S DIVERSIFIED, INC.



Principal Place of Business

4893 S ORANGE BLOSSOM TRAIL
ORLANDO FL 32839-1709
US

Mailing Address

5075 S. ORANGE BLOSSOM TRAIL
ORLANDO FL 32839
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/15/1985

4. FEI Number

59-2543428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3951 S Highway 17-92

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

23 Casselberry FL

City & State

27

28

Zip

24 32730

Country

25 Seminole

Zip

29

Country

30

9. Name and Address of Current Registered Agent

URANICK, GERALD W.
4893 S ORANGE BLOSSOM TRAIL
ORLANDO FL 32809

10. Name and Address of New Registered Agent

81 Name

Uranick, Gerald W

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

5075 S Orange Blossom Trail

83

84

City Orlando

FL

85 Zip Code

32839

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

Gerald W. Uranick
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-15-99

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME URANICK, GERALD W.
STREET ADDRESS 2304 CARIBBEAN CT
CITY-ST-ZIP ORLANDO FL

TITLE V ☐ DELETE
NAME URANICK, CAROL A.
STREET ADDRESS 2304 CARIBBEAN CT
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 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, with all other like empowered.

SIGNATURE:

Gerald W. Uranick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-15-99

Daytime Phone #

407 851 3962

CR2E034 (1/98)