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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## 1997

DOCUMENT # H79272

(1)

SABATELLO DEVELOPMENT CORPORATION II, INC.

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SIGNATURE  11. Pursuant to the provisions of Sociors 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or togistered agent, or both, in the State of Korida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or togistered agent, or both, in the State of Korida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or togistered agent and trainial with, and accept the obligations of, Socion 607 0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or togistered agent							egistered Agent	
SUITE 109 PALM BEACH GARDENS FL 33418  87 City FL 85 Ci				8	Name			
PALM BEACH GARDENS FL 33418    Same   Palm	1			8:	2 Street Add	dress (P.O. Box Number is Not Accepte	able)	
### City ###		=		R	<u></u>			
TIT. Pursuant to the provisions of Socions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or flogistored 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 typed or prevented required agent and feet if applicable   PAPP	PAL	LM BEAUTI GARDENS FL 33410		L				
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SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF

M. Sabatello, Pres.

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 of 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 change or the corporation of the cor

\*\*\*165.00

**FILED** 

May 05 1997 8:00am

Secretary of State