

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 6/28/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Northam
 Secretary of State
 DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 JUL -3 AM 8:13

DOCUMENT # H90872 (3)

1. Corporation Name

FINEST AMERICAN MARKETING EMPIRE, INC.

Principal Place of Business

808C ORIENTA AVE
 ALTAMONTE SPRINGS FL 32701
 US

Mailing Address

808C ORIENTA AVE
 ALTAMONTE SPRINGS FL 32701
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/19/1985

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21 **2520 Sand Lake Road**
 Suite, Apt. #, etc.

2a. Mailing Address

28 **P.O. Box 916224**
 Suite, Apt. #, etc.

22 City & State

23 **Longwood, FL**
 City Country

27 City & State

28 **Longwood, FL**
 City Country

24 **32779-5809** 25 **Seminole**

29 **32791-6224** 30 **Seminole**

4. FEI Number
59-2624526

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

7. This corporation has liability for alternate tax under s. 190 (1)?
 Florida Statutes ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

SPERONI, ANTHONY R.
808C ORIENTA AVE
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent

81 Name **Anthony Speroni**
 82 Street Address (P.O. Box Number is Not Acceptable)
2520 Sand Lake Road
 83
 84 City **Longwood** **FL** 85 Zip Code **32779**

11. Pursuant to the provisions of Sections 607.02 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

Anthony Speroni

(NOTE: Registered Agent signature required when rechartering)

6/28/95

12. OFFICERS AND DIRECTORS

TITLE **P**
 NAME **SPERONI, ANTHONY R.**
 STREET ADDRESS **906C ORIENTA AVE**
 CITY, ST, ZIP **ALTAMONTE SPRINGS FL**

TITLE **S**
 NAME **SPERONI, JEANETTE M.**
 STREET ADDRESS **906C ORIENTA AVE**
 CITY, ST, ZIP **ALTAMONTE SPRINGS FL**

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

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 CITY, ST, ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IF ANY

1.1 TITLE **Pres + Sect.** ☒ Change ☐ Addition
 1.2 NAME **Anthony R. Speroni**
 1.3 STREET ADDRESS **2520 Sand Lake Road**
 1.4 CITY, ST, ZIP **Longwood, FL 32779-5809**

2.1 TITLE ☐ Change ☐ Addition
 2.2 NAME
 2.3 STREET ADDRESS **DELETE**
 2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 as an attachment with an address.

SIGNATURE

Anthony Speroni, Pres. **Anthony Speroni**
 SIGNATURE OF OFFICER OR DIRECTOR OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/28/95 407-788-3263
 (Type Here)

CR2E034 (3/95)