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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J05074

(6)

FILED
Aug 28 1997 8:00am
Secretary of State

21 Sulte, Apt. #				Principal Piace of Business Mailing Address Marsilio Marsilio					
21 Sulte, Apt. #							3. Date incorporated or Qualified 3a. Date of Last Rep		
21 Sulte, Apt. #	Principal Place of Business 2e. Mailing Address						03/20/1986 4. FEI Number	<u> 05/01/199</u>	Applied For
Sulte, Apt. #	ged of Dusiness	26					59-2659422 Not Applica		
	#, etc.		Suite, Apt. #, etc.				SR 75 Additional		
22		27					5. Certificate of Status Desired		Required
		City & S	State				6. Election Campaign Financing	\$5.0	0 May Be
23		28					Trust Fund Contribution		
Zip Country		Zip Count			untry		8. This corporation has liability for intangible tax under s. 199.03		rs. 199.032,
24	25	29		30	,			Yes No	
	9. Name and Address of Curren	nt Hegistered Ag	ent		81	Name	10. Name and Address of New Re	gisterea Agent	
MARSILIO, ANTHONY B. 2950 ALOMA AVENUE SUITE ∲103 WINTER PARK FL 32792					82 83 84	Street A	ddress (P.O. Box Number is Not Acceptab		ip Code
SIGNATURE 5	Signature, typod or printed name of registered age OFFICERS ANI	D DIRECTORS	DELETE	1E Registore 13.		nt signature ro	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECT	
NAME	MARSILIO, ANTHONY B.	ı		1.1 H				L Chang	ic D vocition
STREET ADDRESS	2950 ALOMA AVENUE #103					ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			- 1	(1Y-S	· \			
TITLE	D		DELETE	2.1 10		+		☐ Chang	e 🔲 Addition
NAME	MARSILIO, MARIO, JR.			2.2 N	AME				
STREET ADDRESS	2950 ALOMA AVENUE #103			2.3 S	TREET	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			2.40	HTY-S	T-ZIP			
TITLE		[DELETE	3.1 71	TLE	}		Chang	e L Addition
NAME				3.2 N			.•*		
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			DELETE	_	S-YTK	IT-ZIP		☐ Chanc	e Addition
TITLE		ι	DELETE	4111				L Unang	E T VOORIDO
NAME CTREET ADDRESS				4.2 N		ADDOCCO			
STREET ADDRESS CITY-ST-ZIP					IREET ITY-S1	ADDRESS			
TITLE			DELETE	4.4 CI		1 - T(L		Chang	e Addition
NAME		•		5.2 N					
***						ADDRESS			
STREET ADDRESS				3.53					
STREET ADDRESS				540	ITY - S1	1-7IP			
STREET ADDRESS CITY-ST-ZIP TITLE			DELETE	5.4 CI 6.1 TI		1-ZIP		Chang	e Addition
CITY-ST-ZIP			DELETE		ITLE	1 - ZIP		☐ Chang	e Addition
CITY-ST-ZIP TITLE			DELETE	6.1 TI 6.2 N	ITLE AME	ADDRESS		☐ Chang	e Addition

on nereby 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 withfan address.

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