FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # J32490

(1)

RICHARD A. DALESSIO, CONSTRUCTION, INC.

Principal Place 1983 CRAFTON JUNO ISLES FO	I RD.	Mailing Address 1963 CRAFTON RD #5206 JUNOLSES FL 33408-2212 US								
						Date Incorporated or Qualified 09/10/1986	3a. Date of Last Report 03/08/1996			
2. Principal Pl	ace of Business	28. Mailing Address 26				4.	FEI Number 59-2750977			pplied For ot Applicable
Suite, Apt.		Suite Apr. #, etc.			******	5.	Certificate of Status Desired		+ · ·	Additional equired
City & State	3	City & State					Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	30	ntry				¥Yes [] No	i. 199.032,
	9. Name and Address of Curre	ent Registered Agent				10.	Name and Address of New Re	gistered A	gent	
	essio, richard A. Sr.			81	Name					
1963 CRAFTON RD JUNO ISLES FL 33408					Street Ad	ddress (P	O. Box Number is Not Acceptab	ole)		
Ų (II)	O IOLLO I L OUTOU		}	в3						
			f	84	City				85 Zip	Code
11 Purcuant	to the provisions of Sections 607.05	s02 and 607 1508 Florida Statute	os the ah	NOVE	named co	ornoration	n submits this statement for the r	FL Durnose of	changing i	its registered
agent La	egistered agent, or both, in the Stat ni familiar with, and accept the obli- signment post in potentialness regions a	gations of, Section 607.0505, Flo gestans spectraphicable (NOT	orida Stati	utes	the corpor	avired when	reinstating)	DATE		
12.		ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC			
TITLE	DPV Dalessio, Richard Sr.	DELETE	1 1 717						L Change	☐ Addition
NAME	1963 CRAFTON RD		1 2 NA							
STREET ADDRESS	JUNO ISLES FL				ADDRESS					
CITY - ST - ZIP TITLE	DST	DELETE	14 C/F		I-ZIP				Change	Addition
NAME	DALESSIO, JOANNE	2 10000	1	NAME					4.4.180	
STREET ADDRESS	1983 CRAFTON RD				ADDRESS					
CITY-SI-782	JUNO ISLES FL			LC(TY - ST - ZIP						
TITLE		☐ DELETE	3 1 TITLE						Change	Addition
NAME			3.2 NA	MÉ						
STREET ADDRESS			3.3 STI	REET	ADDRESS					
CHY-ST-ZIP			3.4. Cl		T-7IP					
TIFLE	DELETE			4.1 TITLE					Change	Addition
NAME			4 2 N/							
STREET ADDRESS					ADDRESS		4			
CITY - ST - ZIP	DELETE			4.4 CITY-ST-7/P 5.1 T/TLE					Channa	Addition
TITLE		FT nereit	5.1 HI 5.2 NA		ļ				Change	
NAME ETREET ADDRESS					ADDRESS					
STREET ADDRESS			5.3 \$1							
CITY - ST - ZIP TITLE		DELETE	6 1 III		ı · Zir		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME		La occasi	6.2 NA		-					
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP			6.4 CIT				4			
14. I do neret	by certify that the information suppl	ed with this filing does not qualit	y for the	exe	mption stat	led in Se	ction 119.07(3)(i), Florida Statute	s. I further	certify that	the
Lam an ol	n indicated on this annual report of ficer or director of the corporation in Block 12 or Block 13 if charged.	or the receiver or trustee—empow	rered to e	xeci	rate and thute this rep	nat my się port as re	gnature shall have the same lega equired by Chapter 607, Florida S	a effect as Statutes; ar	ir made un id that my i	ider oath; that name