

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

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 037043

1. Corporation Name
R. CARRINO OF CENTRAL FLORIDA, INC.

Principal Place of Business

Mailing Address

7705 TURKEY LK RD.
ORLANDO, FL 32819
US

7705 TURKEY LK RD
ORLANDO, FL 32819
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite Apt. # etc	26	Suite Apt. # etc	10/09/1980	
22	City & State	27	City & State	4. FET Number	
23	Zip	28	Zip	59-2825621	
24	Country	29	Country	Applied For	
25		30		Not Applicable	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
DEKANTER, AMELIA		81 Name			
7705 TURKEY LK RD.		82 Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO, FL 32819		83			
		84 City			
		FL 85 Zip Code			

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

Signature of Registered Agent (if registered agent is not the same as the person signing, attach separate statement)

NOTE: Registered Agent signature required when re-stating!

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		Change Addition	
1. TITLE	PP CARRINO, ANTHONY	1. TITLE	
2. NAME	2117 ST. ANDREWS CR.	2. NAME	
3. STREET ADDRESS	ORLANDO, FL 32835	3. STREET ADDRESS	
4. CITY & STATE		4. CITY & STATE	
5. TITLE	D CARRINO, LUCILLE	5. TITLE	
6. NAME	5988 CITESAPEAKE PK	6. NAME	
7. STREET ADDRESS	ORLANDO, FL 32819	7. STREET ADDRESS	
8. CITY & STATE		8. CITY & STATE	
9. TITLE	D DEKANTER, AMELIA	9. TITLE	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	8007 WESTMINSTER AVE, BLDG
12. CITY & STATE		12. CITY & STATE	ORLANDO FL 32835
13. TITLE		13. TITLE	
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
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98. NAME		98. NAME	
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100. CITY & STATE		100. CITY & STATE	

SIGNATURE:

Amelia Dekanter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-98

CR25034 (11/97)