

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 05 1996 8:00 am
Secretary of State

DOCUMENT # J38802

(1)

1. Corporation Name

PSI INDUSTRIES, INC.

Principal Place of Business

% DOMINICK M. SEMINARA
6468 E ROGERS CIRCLE
BOCA RATON FL 33487

Mailing Address

% DOMINICK M. SEMINARA
6468 E ROGERS CIRCLE
BOCA RATON FL 33487

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25
26 11608 South Rogers Circle
27 Suite, Apt. #, etc.
28 Boca Raton FL
29 33487 30 Palm Beach

3. Date Incorporated or Qualified

10/20/1986

3a. Date of Last Report

01/31/1995

4. FEI Number

59-2736501

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEMINARA, DOMINICK M.
6468 E ROGERS CIRCLE
BOCA RATON FL 33487

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 typed or printed name of registered agent and the state of Florida

(If the Registered Agent signature and name are omitted)

Date

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SEMINARA, DOMINICK M.
STREET ADDRESS 2599 NW 63RD ST
CITY-ST-ZIP BOCA RATON FL
TITLE D
NAME SEMINARA, CAROL J.
STREET ADDRESS 2599 NW 63RD ST.
CITY-ST-ZIP BOCA RATON FL
TITLE D
NAME VIETTI, DEBORAH A.
STREET ADDRESS 19274 REDBERRY CT
CITY-ST-ZIP BOCA RATON FL
TITLE D
NAME SEMINARA, LISA A.
STREET ADDRESS 711 ST ALBANS DR
CITY-ST-ZIP BOCA RATON FL
TITLE D
NAME VIETTI, MIRCO
STREET ADDRESS 19274 REDBERRY CT
CITY-ST-ZIP BOCA RATON FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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 119.07(3)(k), 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 with an address.

SIGNATURE: X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/96

407-597-1133
Toll Free Phone #

CR2E034 (12/95)