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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARIMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

FILED									
Feb	10	1997	7 8:00am						
Se	cre	tary	of State						

	1997 DIVISION OF CORPORATIONS				Secretary of State			
	MENT # J78324 AMINATO, INC.	(7)	- 1- 1		1 140 1110 4 1111 12 12 11 11 11 11 11 11 11 11 11 1	1811 BIBI) BIBIL BIBIL BIF	(I) 1 1(1) 100	
Dringing Place	vs of Business	Mailing Address					. 	
Principal Place of Business 13090 78 AVE NO. SEMINOLE FL 34646		13080 78 AVE NO. SEMINOLE FL 33776-3639						
					3. Date Incorporated or Qualified 06/15/1987	3a. Date of Last 03/05/1996		
2. Principal F	lace of Business	2a. Mailing Address 26			4. FEI Number 59-2821092	} 	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	5 Additional Required	
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip 24	Country 25	7 ip 29 3	Countr 10	гу		Yes No	rs. 199.032,	
	9. Name and Address of Curre	nt Registered Agent		4	10. Name and Address of New Reg	jistered Agent		
	INATO, JOHN C.		8	1 Name				
	131ST NORTH INOLE FL 34646		6:	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
OLM	INOLE I L STOTO		8:	3				
			-	4 0				
			84	4 City		FL 85 Zi	ip Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	the about	vo named cor	rporation submits this statement for the pi ation's board of directors. I hereby accep	urpose of changing	g its registered	
agent. I a	am familiar with, and accept the oblig	pations of, Section 607.0505, Flori	ida Statute	es.	mons board or offectors. Thereby accep	т пе аррыпшент	as registered	
SIGNATURE			y					
12.	Signature typed or printed name of registered ag OFFICERS AN	ent and title if applicable (NOTI	Hegistered A	gerk signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE. ERS AND DIRECTO	ORS IN 12	
TITLE	OP .	DELETE	1.1 1171.6		7,007110107017111020 10 01110	Change	- 	
NAME	DAMINATO, JOHN C.		1.2 NAME					
STREET ADDRESS	9725 131 STREET NORTH		13 STREE	EL ADDRESS				
CITY-ST-ZIP	SEMINOLE FL		14 CITY	S1 - ZIP				
TITLE	D CAMBIATO KINA V	☐ DELEJE	2.1 11114			Chang	e 🔲 Addition 🕻	
NAME	DAMINATO, KIM Y.		2.2 NAME	1			!	
STREET ADDRESS	9725 131 STREET NORTH SEMINOLE FL			ET ADDRESS			;	
CITY-ST-ZIP TITLE	SEMINOLE 1	DELETE	2. 4 CITY 3.1 TELE			Chang	ne Addition	
NAME		SECTION	3.2 NAME	ſ		onang	. Toghton	
STREET ADDRESS				H ADDRESS				
CITY-ST-ZIP			3.4 CITY	· ST - ZIP			J	
TITLE		DELETE	4.1 TITLE			Chang	e Addition	
NAME			4. 2 NAM	:				
STREET ADDRESS			4.3 STREE	T ADDRESS			ĺ	
CITY-ST-ZIP		Deleti	- 44 СПY-	S1 - 7/P		- I ohan		
TITLE		☐ DELETE	5.1 TITLE			∐ Chang	e Addition	
NAME STREET ADDRESS			5.2 NAME	F1 ADDRESS				
CITY-ST-ZIP			5.4 CHY-				ļ	
TITLE		DELETE	6.1 11TLf			Chang	e Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STRCE	1 ADDRESS			J	
CITY - ST - ZIP			6.4 CITY					
14. do here	by certify that the information supplic	a with this tiling does not qualify	for the ex	emption state	ed in Section 119.07(3)(i). Florida Statutes	 I turther certify th 	at 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 direction of the corporation or the receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 on Block 13 if changed, or on an attachment with an address.

IGNATURE: