

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

FILED
Oct 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **R06675**

1. Corporation Name

GATTO & D'ESCARATTA, INC.

Principal Place of Business
**18233 NE 4 COURT
N. MIAMI, FL 33169**

Mailing Address
**444 BRICKELL AVE.
51-333
MIAMI, FL 33133**

Amended

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified
12-10-87

4. FEI Number
65-0107996

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

18233 NE 4 CT.

Suite, Apt. #, etc.

23

2a. Mailing Address

444 BRICKELL AVE

Suite, Apt. #, etc.

51-333

27

City & State

N. MIAMI, FL

24

City & State

MIAMI, FL

28

Zip

33169

Country

USA

Zip

33131

Country

USA

9. Name and Address of Current Registered Agent

**VINCENZO GATTO
444 BRICKELL AVE. #51-333
MIAMI, FL 33131 USA**

81 Name

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

83

84 City

FL

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 fee if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☒ DELETE
NAME **PILAR CASERO**
STREET ADDRESS **444 BRICKELL AVE. #51-333**
CITY - ST - ZIP **MIAMI, FLA. 33131 USA**

TITLE **SECRETARY** ☒ DELETE
NAME **ROBERT KUSE**
STREET ADDRESS **7758 MIRAMAR PKWY**
CITY - ST - ZIP **MIRAMAR, FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition
1.2 NAME **VINCENZO GATTO**
1.3 STREET ADDRESS **444 BRICKELL AVE. # 51-333**
1.4 CITY - ST - ZIP **MIAMI, FLA. 33131 USA**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE **600002613386** ☐ Addition
6.2 NAME **-10/16/98-01009-005**
6.3 STREET ADDRESS *****81.25**
6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(c), 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. 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 1 or Block 13, changed, or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(VINCENZO GATTO)

10/6/98 (305) 859-7329