

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K45917**

(7)

1. Corporation Name
MICHELANGELO, INC.

Principal Place of Business
**% FIDENZIO BIZZOTTO
2901 COMMERCE PARK DRIVE
BOYNTON BEACH FL 33426-8781**

Mailing Address
**% FIDENZIO BIZZOTTO
2901 COMMERCE PARK DRIVE
BOYNTON BEACH FL 33426-8781**



2. Principal Place of Business		2a. Mailing Address	
21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
11/17/1988	05/23/1995
4. FEI Number	Applied For / Not Applicable
65-0113215	<input type="checkbox"/> \$8.75 Additional Fee Required
5. Certificate of Status Desired	<input type="checkbox"/> \$5.00 May Be Added to Fees
6. Election Campaign Financing / Trust Fund Contribution	<input type="checkbox"/>
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**BIZZOTTO, FIDENZIO
2901 COMMERCE PARK DR.
BOYNTON BEACH FL 33435**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.07(1) and 607.15(6), 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 607.0605, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIZZOTTO, FIDENZIO	2. NAME	
STREET ADDRESS	2901 COMMERCE PARK DR.	3. STREET ADDRESS	
CITY-STATE-ZIP	BOYNTON BEACH FL	4. CITY-STATE-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIZZOTTO, GRAZIA	6. NAME	
STREET ADDRESS	2901 COMMERCE PARK DR.	7. STREET ADDRESS	
CITY-STATE-ZIP	BOYNTON BEACH FL	8. CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY-STATE-ZIP		12. CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY-STATE-ZIP		16. CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY-STATE-ZIP		20. CITY-STATE-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 owner 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 of this document, or on a separate sheet with my address.

SIGNATURE: *Fidenzio Bizzotto* **FIDENZIO BIZZOTTO 4-26-96 407 882-6859**

CR2E034 (12/95)