

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90005 007 ***150.00

0039927

DOCUMENT # K45917

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1988

4. FEI Number
65-0113215

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 518 INDUSTRIAL AVE

Suite, Apt. #, etc.

22 14215

City & State

23 BOYNTON BEACH, FL

Zip

24 33435 25 USA

2a. Mailing Address

26 518 INDUSTRIAL AVE

Suite, Apt. #, etc.

27 14215

City & State

28 BOYNTON BEACH, FL

Zip

29 33435 30 USA

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

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE D
NAME BIZZOTTO, FIDENZIO
STREET ADDRESS 2901 COMMERCE PARK DR.
CITY-ST-ZIP BOYNTON BEACH FL

TITLE D
NAME BIZZOTTO, GRAZIA
STREET ADDRESS 2901 COMMERCE PARK DR.
CITY-ST-ZIP BOYNTON BEACH 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 ☒ Change ☐ Addition

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME BIZZOTTO, FIDENZIO
1.3 STREET ADDRESS 518 INDUSTRIAL AVE BAY 14+15
1.4 CITY-ST-ZIP BOYNTON BEACH, FL. 33435

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME BIZZOTTO, GRAZIA
2.3 STREET ADDRESS 518 INDUSTRIAL AVE BAY 14+15
2.4 CITY-ST-ZIP BOYNTON BEACH, FL. 33435

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 ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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(3)(i), 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, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director
FIDENZIO BIZZOTTO President

Date

Daytime Phone #

4-24-99 (561) 740-2045

CR2E034 (11/98)