

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K53853** (3)

1. Corporation Name

**SCAVONE PROPERTIES CORPORATION**



Principal Place of Business

Mailing Address

C/O DENISE SCAVONE  
1215 SE 13 AVENUE  
DEERFIELD BCH FL 33441

C/O DENISE SCAVONE  
1215 SE 13 AVENUE  
DEERFIELD BCH FL 33441

2. Principal Place of Business

2a. Mailing Address

22 State, Apt. #, etc.

26 State, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**SCAVONE, DENISE**  
1215 SE 13 AVE.  
DEERFIELD BEACH FL 33441

3. Date Incorporated or Qualified

12/27/1988

3a. Date of Last Report

04/24/1995

4. FEI Number

65-0081938

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

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 agent 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, Sections 607.0508, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent

Signature of Registered Agent or Registered Agent

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE	D	<input type="checkbox"/> DELETE
NAME	SCAVONE, DENISE	
STREET ADDRESS	1215 SE 13 AVE.	
CITY, STATE, ZIP	DEERFIELD BEACH FL 33441	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCAVONE, MITCHELL	
STREET ADDRESS	1215 SE 13 AVE.	
CITY, STATE, ZIP	DEERFIELD BEACH FL 33441	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, STATE, ZIP	
2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY, STATE, ZIP	
3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY, STATE, ZIP	
4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	
43. STREET ADDRESS	
44. CITY, STATE, ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	
53. STREET ADDRESS	
54. CITY, STATE, ZIP	
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 of changes of officers and directors with an address.

SIGNATURE: *Denise Scavone* Denise Scavone 2/6/96 305-429-0053  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

CR2E034 (12/95)