

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

**FILED**  
**Apr 30, 1999 8:00 am**  
**Secretary of State**

04-30-1999 90137 021 \*\*\*150.00

0500473

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

**DOCUMENT # K80961**

1. Corporation Name  
**FERRENTINO CORPORATION NO. 3**



Principal Place of Business 1281 VALIANT AVE 7720 VENICE DR SPRINGHILL FL 34608 US	Mailing Address 1281 VALIANT AVE 7720 VENICE DR SPRING HILL FL 34608 US
--	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>12430 CITATION ROAD</b> Suite, Apt. #, etc. 22 City & State 23 <b>BROOKSVILLE, FL</b> Zip Country 24 <b>34610</b> 25 <b>USA</b>	2a. Mailing Address 26 <b>12430 CITATION ROAD</b> Suite, Apt. #, etc. 27 City & State 28 <b>BROOKSVILLE, FL</b> Zip Country 29 <b>34610</b> 30 <b>USA</b>
---	--

3. Date Incorporated or Qualified <b>04/13/1989</b>	4. FEI Number <b>65-0131405</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**FERRENTINO, PETER**  
**7720 VENICE DRIVE**  
**PORT RICHEY FL 34668**

10. Name and Address of New Registered Agent

81 Name <b>PETER FERRENTINO</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>12430 CITATION ROAD</b>
83
84 City <b>BROOKSVILLE</b>
85 State <b>FL</b>
86 Zip Code <b>34610</b>

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: *Peter Ferrentino* **PETER FERRENTINO, PRES.** DATE: **04-26-99**

12. OFFICERS AND DIRECTORS

TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>FERRENTINO, PETER</b>	
STREET ADDRESS	<b>7720 VENICE DR.</b>	
CITY-ST-ZIP	<b>PORT RICHEY FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>DP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>PETER FERRENTINO</b>	
1.3 STREET ADDRESS	<b>12430 CITATION ROAD</b>	
1.4 CITY-ST-ZIP	<b>BROOKSVILLE, FL 34610</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Peter Ferrentino* **PETER FERRENTINO, PRES.** DATE: **04-26-99** DAYTIME PHONE: **813-929-9259**

CR2E034 (1/198)