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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT #

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

L10682

(7)

POMODORO, INC.

**FILED** Jan 26 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address  * GIANPIETRO MENEGAZZI						1 tabtialt dat tallt dott beste eter ferte sier eien eien eren eien eien			
	MERCIAL BLVD.		2908 E COMMERCIAL BLVD.			DO NOT WRITE IN THIS SPACE			
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308						3. Date Incorporated or Qualified			
						08/21/1989			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21		26				65-01 <u>40466</u>		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc	Suite, Apt #, etc.			5. Certificate of Status Desired	red 🗀	\$8.75 Additional	
22		27				G. Continuate of British Besides		Fee Re	<del></del>
City & Stat	в	<b>⊢</b>	City & State			6. Election Campaign Financing	П	\$5.00	•
23	<del></del>	28	1 00	untry		Trust Fund Contribution		Added t	
Zip	Country	Zip	30	אווווע		This corporation owes or has p     Personal Property Tax due June			angibie ] No
24	25 9. Name and Address of Cu	rrent Registered Agent	[30]	T		10. Name and Address of New Registered Agent			
ME	NEGAZZI, GIANPIETRO			81	Name				
	08 E. COMMERCIAL BLVD.			82	Ctroot Addr	ess (P.O. Box Number is Not Accepta	ble)		···
	LAUDERDALE FL 33308			02	Stieet Audi	ess (r.O. box (vullibel is Not Accepta	Dicy		
''				83					
				84	City			85 Zip (	Code
							FL		<del></del>
11. Pursuant office or agent. I a	registered agent, or both, in the S am <b>fa</b> miliar with, and accept the o	State of Florida, Such change obligations of, Section 607.050	was authorize 5, Florida Sta	tules	y the corporati S.	oration submits this statement for the ion's board of directors. I hereby acce	pt the app	ointment as	registered
	Signature, typed or printed name of registers		(NOTE: Rogistere	d Age	ont signature requir	ed whon re-nstating)  ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTOR	RS IN 12
12.	OFFICERS	AND DIRECTORS		ITLE	T"	ADDITIONS/CHANGES TO OTT	OLIIO AND	Change	Addition
NAME	MENEGAZZI, GIANPIETRO			IAMÉ				•	
STREET ADDRESS	2908 E. COMMERCIAL BL				ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL.	_			51 - ZIP				
TITLE	V	☐ DELET						Change	Addition
NAME	MENEGAZZI, LINDA		2.21	IAME					
STREET ADDRESS	2908 E COMMERCIAL		2.3 9	TREET	ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL				ST - ZIP				Addition
TITLE		DELETI						Change	Addition
NAME				IAME					
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP		DELET			ST - ZIP			Change	Addition
TITLE		ריי אנונני		NAME					
NAME PERCET ADDRESS			ı.		ADDRESS				
STREET ADDRESS					ST-ZIP				
CITY-ST-ZIP	-	DELET						Change	Addition
NAME				AME				1 ./	_
STREET ADDRESS			5.3 9	STREET	I ADDRESS		4//	11/0	17,

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 of 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 of an atfaction with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

90000241273 -01/27/93--01018--030

\*\*\*150.00

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POMODORO, INC.

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Principal Place o	of Business	Ma	iling Address				a tensioni ant tibit dozta nitet inite ateri alati ateri alati ateri alati alati alati ater	ii ( <b>4 b</b> i		
* GIANPIETRO MENEGAZZI			LVD.	DO NOT WRITE IN THIS SPAC						
							3. Date Incorporated or Qualified 08/21/1989			
2. Principal Plac	e of Business	2a.	2a. Mailing Address				4. FEI Number Applie	d For		
21							<b>65-0140466</b> Nol Ar	pplicable		
Suite, Apt. W, etc.			Suite, Apt #, etc.				5. Certificate of Status Desired			
City & State			City & State				6. Election Campaign Financing \$5.00 May	v Be		
23		28	B				Trust Fund Contribution Added to Fe			
Zip	Country		Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25	29		30			Personal Property Tax due June 30. Yes N	0		
	9. Name and Address of Curre	nt Regist	ered Agent				10. Name and Address of New Registered Agent	10. Name and Address of New Registered Agent		
[	EGAZZI, GIANPIETRO				81	Name				
2908 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308				82 Street Add			ress (P.O. Box Number is Not Acceptable)			
,					83					
					84	City	FL 85 Zip Code	e		
11. Pursuant to t	the provisions of Sections 607.05	02 and 60	7 1508 Florida Statu	tes, the a	bovo	e-named co	rporation submits this statement for the purpose of changing its re-	aistered		
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	nature, typed or printed name of registereo a	and and Ohn S	1	ti . D. a stano			juried whon re-estating) DATE			
12,	OFFICERS A			13.	a Age	it signame requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	J 12		
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NAME	MENEGAZZI, GIANPIETRO			1.2 N	AME		<del>-</del> •			
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CITY-ST-ZIP	FT. LAUDERDALE FL.			•	1y - \$1	I		ĺ		
TITLE	V		☐ DELETE	2 1 71			Change	Addition		
NAME	MENEGAZZI, LINDA			2.2 N/	AME			1		
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TITLE			☐ DELETE	6.1 TII			900002412739 <sup>hang L</sup>	Addition		
NAME				6.2 NA			900002412739 <sup>nange</sup>			
STREET ADDRESS						ADDRESS	***150.00			
CITY-ST-ZIP	life that the information supplied a	uith thic fil	ina dose not qualify f	64 C(			n Section 119 07(3)(i) Florida Statutes I further certify that the info			

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Turther certify that the information indicated on this annual report or supply hential 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 this corporation of 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 of an attachment with an address.