

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

FILED

Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L37866 (5) 1. Corporation Name VINCENT ANTHONY CORPORATION					
Principal Place of Business % VINCENT A. CAGGIANO 1607 LEE RD WINTER PARK FL 32789 US			Mailing Address % VINCENT A. CAGGIANO 934 DUPONT AVE. WINTER PARK FL 32789		
2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country			2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country		
3. Date Incorporated or Qualified 12/19/1989			4. FEI Number 59-2979981		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
7. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. ☐ Yes ☐ No			8. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent CAGGIANO, VINCENT A. 934 DUPONT AVE. WINTER PARK FL 32789			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 FL		
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 _____ DATE _____ Signature is valid if printed name of registered agent and date of appointment. (If the registered agent signature is required when filing, the date is required.)					
12. OFFICERS AND DIRECTORS TITLE PD NAME CAGGIANO, VINCENT A. STREET ADDRESS 934 DUPONT AVE. CITY-STATE-ZIP WINTER PARK FL DELETE ☐			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE ☐ Change ☐ Addition 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP 21 TITLE ☐ Change ☐ Addition 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP 31 TITLE ☐ Change ☐ Addition 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP 41 TITLE ☐ Change ☐ Addition 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP 51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP 61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 CITY-STATE-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.					
SIGNATURE: <u>VINCENT A. CAGGIANO</u> 1-17-98 407-628-8713 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (10-97)