

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

00000002

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 JUL 10 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # L38290

(7)

1. Corporation Name

TRIO HOTEL CORPORATION

Principal Place of Business

%SANDRA MOSCHINI
129 TAFT DRIVE
SARASOTA FL 34236

Mailing Address

%SANDRA MOSCHINI
129 TAFT DRIVE
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/20/1989

4. FEI Number

59-2989130

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

MOSCHINI, SANDRA
129 TAFT DRIVE
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

426 CLEVELAND DR.

83

84 City SARASOTA

FL

85 Zip Code

34236

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 *Sandra Moschini*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7-1-98
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MOSCHINI, SANDRA
STREET ADDRESS 129 TAFT DR
CITY-ST-ZIP SARASOTA FL

☐ DELETE

TITLE D
NAME MOSCHINI, MARCO
STREET ADDRESS 129 TAFT DR
CITY-ST-ZIP SARASOTA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

900002589139-2
-07/14/98--01101--030
****165.00 ****158.75

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 *Sandra Moschini* SANDRA MOSCHINI

7-1-98

941-388-5525

CR2E034 (5/98)



To whom it may concern,

7-1-98

I have just received your "2nd Notice" report concerning our filing of our 1998 Annual Report. I am enclosing a copy of the check which was sent on April 15, 1998, however, as of today we have not received the cancelled check in return, which we assume has been lost. The check was sent to P.O. Box #6327 instead of the P.O. Box #1500 which appears on your return envelope. I am enclosing another check in the original amount of \$165.00. I would very much appreciate notification when you receive this material. Please notice the change of address, which I have also sent notification of yesterday.

Thank you for your
assistance in this
matter

Sincerely,
Audra Moschini
Registered Agent

NAME TRIO HOTEL CORP.

03-905/631

ACCOUNT # _____

APRIL 15 1998

PAY TO THE ORDER OF

DEPARTMENT OF STATE

\$ 165.00

ONE HUNDRED SIXTY FIVE

100

DOLLARS



062
Barnett Bank, N.A.
Southwest Florida

for Annual Report 1998

Lauda M. ...

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1622404892⑆