

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

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**FILED**  
Aug 29 1996 8:00 am  
Secretary of State

**DOCUMENT # L41270 (4)**  
1. Corporation Name  
**1121 SOUTH FEDERAL, INC.**



**REINSTATEMENT 96**

3. Date Incorporated or Qualified **01/02/1990** 3a. Date of Last Report **07/28/1995**

4. FEI Number **65-0205066** 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

Principal Place of Business <b>1121 S. FEDERAL HIGHWAY DANIA FL 33004</b>		Mailing Address <b>1121 S. FEDERAL HIGHWAY DANIA FL 33004</b>	
2. Principal Place of Business	2a. Mailing Address	21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.	22	27
City & State	City & State	23	28
Zip	Country	24	30
25	29		

**9. Name and Address of Current Registered Agent**

**SCOTTO, SUSIE**  
**1121 S. FEDERAL HIGHWAY**  
**DANIA FL 33004**

**10. Name and Address of New Registered Agent**

81 Name **Ralph Scotto**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1121 S Federal Hwy**  
83  
84 City **Dania** FL 85 Zip Code **33004**

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 **Ralph Scotto** *Ralph Scotto* **2/13/96**  
Signature typed or printed name of registered agent and that of corporation (Date)

**12. OFFICERS AND DIRECTORS**

TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>SCOTTO, SUSIE</b>	
STREET ADDRESS	<b>1121 S. FEDERAL HIGHWAY</b>	
CITY-ST-ZIP	<b>DANIA FL</b>	
TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>SCOTTO, RALPH</b>	
STREET ADDRESS	<b>1121 S. FEDERAL HIGHWAY</b>	
CITY-ST-ZIP	<b>DANIA FL</b>	
TITLE	<b>STD</b>	<input type="checkbox"/> DELETE
NAME	<b>SCOTTO, MICHAEL</b>	
STREET ADDRESS	<b>1121 S. FEDERAL HIGHWAY</b>	
CITY-ST-ZIP	<b>DANIA FL</b>	
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>PD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>RALPH SCOTTO</b>	
1.3 STREET ADDRESS	<b>1121 S FEDERAL HWY</b>	
1.4 CITY-ST-ZIP	<b>DANIA FL 33004</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		

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\*\*\*\*200.00 \*\*\*\*200.00

*R/S 8/29*

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 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: *Ralph Scotto* **Ralph Scotto** **2/13/96**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date)

CR2E034 (12/95)