

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L42730**

(6)

1. Corporation Name

ESPOSITO CONSTRUCTION, INC.



Principal Place of Business

**256 LIVE OAK RD.
VERO BCH. FL 32963
US**

Mailing Address

**% JOHN PAUL KISTLER JR
105 41ST CT
VERO BEACH FL 32968**

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

Zip

Country

24

29

9. Name and Address of Current Registered Agent

**KISTLER, JOHN PAUL JR
105 41ST CT
VERO BEACH FL 32968**

3. Date Incorporated or Qualified

01/10/1990

3a. Date of Last Report

03/02/1995

4. FEI Number

06-0892533

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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

Signature of registered agent or officer of the corporation

Signature of new registered agent or officer of the corporation

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

D

**ESPOSITO, DOMENICK
256 LIVE OAK RD.
VERO BEACH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

D

**ESPOSITO, LILLIAN
256 LIVE OAK RD.
VERO BEACH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

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STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS

☐ Change ☐ Addition

14 CITY-STATE-ZIP
21 TITLE
22 NAME

☐ Change ☐ Addition

23 STREET ADDRESS
24 CITY-STATE-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS

☐ Change ☐ Addition

34 CITY-STATE-ZIP
41 TITLE
42 NAME

☐ Change ☐ Addition

43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS

54 CITY-STATE-ZIP
61 TITLE
62 NAME

63 STREET ADDRESS
64 CITY-STATE-ZIP

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 supplement to 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-96 (407)231-5497

Date

Business Phone #

CR2E034 (12/95)