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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

141

	RY HOMES BY GOZZO,	INC.								
rincipal Place	e of Business	Mailing Address	3			-{				
9121 N MILITARY TR. #216 PALM BCH GDNS FL 33410			9121 N MILITARY TR. #216 PALM BCH GDNS FL 33410							
						3. Date Incorporated or Oct 01/18/1990	ualified	3a. Date 03	of Last I /21/18	
. Principal Pla - -	lace of Business	2a. Mailing Add	ress			4. FEI Number 65-0167951				Applied For
LSuite, Apt. (#, etc.	Suite, Apt. #	t. etc.						\$9.7	Not Applicable 5 Additional
		27	,			5. Certificate of Status Des	ired	¥		Required
City & State	e	City & State				6. Election Campaign Finar	noing	<u></u>	\$5.0	00 May Be
	·····	28				Trust Fund Contribution			Add	ed to Fees
Zip	Country 25	Zip		untry		8. This corporation has liat		~	k under s	199.032,
	9. Name and Address of Cu	29 urrent Registered Agent	[30]	T	·-·······	Florida Statutes 10. Name and Address of		□ No	cent	
	·	<u> </u>		81	Name	TO, TIGHTO WITH MODIFIES OF	11017 110	Aletalen V	. Aout	
GOZZO,	, GREGORY			100	Chrona Andria	/D O Doy Number in Net A				
9121 NC	ORTH MILITARY TRAIL		82 Street			ss (P.O. Box Number is Not A	cceptable	")		
SUITE 2				83						
PALM B	EACH GARDENS FL 33410			84	City				85 Z	ip Code
	•				•			FL		•
orregister	to the provisions of Sections 607.0 ed agent, or both, in the State of	riorida. Sucri change was	authorized by the	ove-na corpo	amed corpora tration's board	ition submits this statement for d of directors. I hereby accept t	the purp he appoi	ose of char	nging Its registere	registered officed agent. Lam
familiar wit	th, and accept the obligations of,	Section 607.0505, Florida	Statutes.	,		,,,,,,, .	по орроп		09.0.0.0	o ogora: rum
	Signature, Novid or printed name of repistered	l arrent and title if applicable	NOTE Basislera	od Anget	e countries man ward	urban renetation		DAY		
	Signature, typed or printed name of registered OFF ICERS	l agent and title if applicable S AND DIRECTORS	(NOTE: Registere		signature required		O OFFIC	DATE ERS AND I	DIBECTO	ORS IN 12
•	OFFICERS PSD		13.		Sgriafture requirenge	when renstating) ADDITIONS/CHANGES	O OFFIC	ERS AND I	DIRECTO	ORS IN 12
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SIGNATURE: X SIGNATURE AND TY ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/27/96 407-626-8062

CR2E034 (12/95)