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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

COCCUMENT # L44206 (5) GOZZO DEVELOPMENT, INC. Maing Address Mai	1996		Secreta DIVISION OF	ary of State CORPORATIO	ONS			
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28 Street Address of Country 20 Address of New Registered Agent 20 Addr	City & State	27	City & Ctate				Д.	Fee Required
Country Zup Country Zup Country Replaced Report Replaced Report	Only & Otale	28	Ony & State					
9. Name and Address of Current Registered Agent GOZZO, GREGORY 9121 NORTH MILITARY TRAIL SUITE 216 PALM BEACH GARDENS FL 33410 84 City FL		├ ──1	Zıp	<u> </u>				
GOZZO, GREGORY 9121 NORTH MILITARY TRAIL SUITE 218 PALM BEACH GARDENS FL 33410 Evaluation to the provisions of Sections 607,0502 and 607,1508. Floridal Statutes, the above named corporation submits this statement for the purpose of changing its registered of rengistered agent, or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I thereby accept the physicines of, Section 607,0505, Floridal Statutes. SYNATURE Standard type for detendance of registered agent for the players with a statement for the purpose of changing its registered agent. I am SYNATURE Standard type for detendance of registered agent for the players agent with, and accept the obligations of, Section 607,0505, Floridal Statutes. SYNATURE Standard type for detendance of registered agent for the players agent players agent possible registered agent in the propose of changing its registered agent. I am SYNATURE SYNATURE Synamic type for detendance of registered agent for the players agent possible registered agent agent possible registered agent agent possible registered agent agent possible registered agent agent possible registered agent. I am SYNATURE Synamic type for detendance of registered agent agent possible registered agent agent possible registered agent agent possible registered agent. I am SYNATURE Synamic type for detendance of registered agent agent possible registered agent possible registered agent. I am SYNATURE Synamic type for detendance of registered agent agent possible registered age			tered Agent	1301				nt
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SUITE 216 PALM BEACH GARDENS FL 33410 Fursional to the provisions of Sections 607,0502 and 607,1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered off or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am standard with, and accept the obligations of Section 607,0505, Florids Statutes. 3NATURE South in figure 1 proof is prefed agent of the flagstrate. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. PSD GOZZO, GREGORY 15 INTE 12 NAME 13 SIRRET ADDRESS 14 OFFICERS AND DIRECTORS IN 12. 14 DIRECTORS IN 12. 15 SIRRET ADDRESS 15 SI TIPE 14 TIPE 15 JUPITER FL OFFICERS AND DIRECTORS IN 12. 15 SIRRET ADDRESS 15 SI TIPE 16 OFFICERS AND DIRECTORS IN 12. 27 NAME 28 SIRRET ADDRESS 44 OTT-SI ZIP 15 SIRRET ADDRESS 45 SIRRE		TDAH		82	Street Addr	ress (P.O. Box Number is Not Acceptat	(ek	
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 agent. I am carried with, and accept the obligations of, Section 607-0506, Florida Statutes. NATURE Supplies the provisions of Sections 607-0506, Florida Statutes. The above-named corporation's board of directors. I hereby accept the obligations of, Section 607-0506, Florida Statutes. NATURE Supplies the provisions of, Section 607-1508, Florida Statutes. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS IN 12 PSD GOZZO, GREGORY 12 NAME 13 STREET ADDRESS 14 OFFICERS AND DIRECTORS IN 12 12 NAME 13 STREET ADDRESS 14 OFFICERS AND DIRECTORS IN 12 22 STREET ADDRESS 24 OFFI-SE-2P 14 ITIRE 15 TIRE 16 DELETE 17 TIRE 18 OFFICERS AND DIRECTORS IN 12 23 STREET ADDRESS 34 OFFI-SE-2P 14 ITIRE 15 TIRE 16 DELETE 17 TIRE 18 OFFICERS AND DIRECTORS IN 12 24 NAME 35 STREET ADDRESS 44 OFFI-SE-2P 16 DELETE 17 TIRE 18 OFFICERS AND DIRECTORS IN 12 18 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 10 OFFICERS AND DIRECTORS IN 12 11 ADDRESS 13 STREET ADDRESS 44 OFFI-SE-2P 14 ITIRE 15 TIRE 16 OFFICERS AND DIRECTORS IN 12 18 OFFICERS AND DIRECTORS IN 12 18 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 10 OFFICERS AND DIRECTORS IN 12 11 ADDRESS 44 OFFI-SE-2P 11 TIRE 12 ADDRESS 44 OFFI-SE-2P 13 TIRECTORS IN 12 14 TIRECTORS IN 12 15 TIRECTORS IN 12 16 OFFICERS AND DIRECTORS IN 12 17 TIRECTORS IN 12 18 OFFICERS AND DIRECTORS IN 12 18 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 19 OFFICERS AND DIRECTORS IN 12 20 OFFICERS AND DIRECTORS IN 12 21 TIRECTORS IN 12 22 NAME 23 STREET ADDRESS 44 OFFICERS AND DIRECTORS IN 12 45 OFFICERS AND DIRECTORS IN 12 46 OFFICERS AND DIRECTORS IN 12 47 OFFICERS AND DIRECTORS IN 12 48 OFFICERS AND DIRECTORS IN 12 48 OFFICERS A		ITAL		83				
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 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 ferralize with, and accept the obligations of, Section 607.0505, Florida Statutes. NATURE Synature: Synatur	PALM BEACH GARDENS	FL 33410		RA	City			s Zo Codo
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ST-ZIP 64 CITY-ST-ZIP 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 certific that the information indicates at the contraction of the	SNATURE Separative typerfor problem PSD GOZZO, GREC 190 SPYGLAS JUPITER FL ELLADORESS Y-ST-ZIP F ME	OFFICERS AND DIREC	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 DITY-ST 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST 6.1 TITLE 6.2 NAME 6.2 NAME	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	d when reinstating)	DATE ICERS AND DIF	RECTORS IN 12 hange

SIGNATURE: X SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2 21 96 (407) 626-8062

Date Prone !