

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

DOCUMENT # **L50517** (6)

1. Corporation Name

SOZIO CONSTRUCTION CO.



Principal Place of Business

**909 SE 47TH TERRACE #105
CAPE CORAL FL 33904**

Mailing Address

**909 SE 47TH TERRACE #105
CAPE CORAL FL 33904**

3. Date Incorporated or Qualified

02/12/1990

3a. Date of Last Report

03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0206821

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOZIO, ANTHONY S

1500 SE 11TH AVE.

CAPE CORAL FL 33990

81. Name

Same

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

1111 SE 16TH STREET

83

84. City

Same

FL

85. Zip Code

33990

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 set forth in 607.0505, Florida Statutes.

SIGNATURE

Anthony S. Sozio

(If the Registered Agent Signature is required, please print name and date)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	P	☐ DELETE
NAME	SOZIO, ANTHONY S	
STREET ADDRESS	1500 SE 11TH AVE.	
CITY-STATE-ZIP	CAPE CORAL FL 33990	
NAME	D	☐ DELETE
NAME	SOZIO, SYLVESTER	
STREET ADDRESS	159 PINE ISLAND RD.	
CITY-STATE-ZIP	CAPE CORAL FL 33909	
NAME	S	☐ DELETE
NAME	SOZIO, ANTHONY S III	
STREET ADDRESS	1500 SE 11TH AVE.	
CITY-STATE-ZIP	CAPE CORAL FL 33990	
NAME	D	☐ DELETE
NAME	SOZIO, NICHOLAS A	
STREET ADDRESS	159 PINE ISLAND RD.	
CITY-STATE-ZIP	CAPE CORAL FL 33909	
NAME		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
NAME		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

NAME	P	☒ Change ☐ Addition
NAME	Sozio, Anthony S	
STREET ADDRESS	1111 S.E. 16th Street	
CITY-STATE-ZIP	Cape Coral, FL. 33990	☐ Change ☐ Addition
NAME	S	☐ Change ☐ Addition
NAME	Sozio, Anthony S III	
STREET ADDRESS	159 Pine Island Rd	
CITY-STATE-ZIP	Cape Coral, FL. 33909	☐ Change ☐ Addition
NAME	D	☐ Change ☒ Addition
NAME	Sozio, Scott M	
STREET ADDRESS	1111 SE 16th Street	
CITY-STATE-ZIP	Cape Coral, FL. 33990	☐ Change ☐ Addition
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 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:

Anthony S. Sozio

Anthony S. Sozio

Feb 8, 1996

(941) 540-7443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Telephone Number)

CR2E034 (12/95)