## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L53845

(8)

NICHOLAS LADUCA, INC.

| Principal Plac                 | e of Business                                     | Mailing Address   |                             |                      | 1 (USINS)) OD) SIIGA HIDI HIM BYSSI DIN SEEK SIAH OJON BYSNI BIQN DIBN 1881        |                      |               |             |
|--------------------------------|---|---|-----------------------------|----------------------|--|----------------------|---------------|-------------|
| 1908 WOODSIDI<br>PLANT CITY FL |   | 1908 WOODSIDE CT<br>PLANT CITY FL 33567                           |                             |                      |  |                      |               |             |
|                                |   |   |                             |                      | 3. Date Incorporated or Qualified 02/26/1990                                       | 3a. Date of 06/28/19 |               | oort        |
| 2. Principal P                 | Place of Business                                 | 2a. Mailing Address   |                             |                      | 4. FEI Number  | 1 2 3 2 3 3          |               | lied For    |
| 21                             |   | 26  |                             |                      | 59-2994448   | Ì                    | Not /         | Applicable  |
| Suite, Apt                     | #, etc  | Suite, Apt. #, etc.   |                             |                      | E Cardificate of Status Desired  |                      | .75 Ad        | ditional    |
| 22                             |   | 27  |                             |                      | 5. Certificate of Status Desired   |                      | Fee Requ      | ulred       |
| City & Stat                    | te  | City & State  |                             | •                    | 6. Election Campaign Financing   | \$                   | <b>5.00</b> м | ay Be       |
| 23                             |   | 28  |                             |                      | Trust Fund Contribution  |                      | dded to       | Fees        |
| Zip                            | Country   | Zip   | Cou                         | ntry                 | 8. This corporation has liability for  |                      |               | 99.032      |
| 24                             | 25  | 29  | 30                          |                      |  | YesNo                |               |             |
|                                | 9. Name and Address of Curre                      | ent Registered Agent  |                             | 81 Name              | 10. Name and Address of New R  | agistered Agent      |               |             |
|                                | OUCA, NICHOLAS                                    |   |                             | DI Name              |  |                      |               |             |
|                                | WOODSIDE CT                                       |   |                             | 82 Street Add        | Iress (P.O. Box Number is Not Accepta  | ble)                 |               | <del></del> |
| PLAN                           | NT CITY FL 33567                                  |   | ļ                           | 83                   |  | <del></del>          | <del></del>   |             |
|                                |   |   |                             | 83                   |  |                      |               |             |
|                                |   |   |                             | 84 City              |  | 85 رسو               | Zip Co        | de          |
|                                |   |   |                             |                      |  | FL "                 | L             |             |
| office or r                    |   | te of Florida. Such change wa                                     | s authorized                | by the corpora       | poration submits this statement for the ation's board of directors. I hereby acce  |                      |               |             |
| SIGNATURE                      |   |   |                             |                      |  |                      |               |             |
|                                | Signature, typied or printed name of registered a |   |                             | Agent signature requ | ired when reinstating)   | DATE                 |               |             |
| 12.                            |   | ND DIRECTORS  | 13.                         |                      | ADDITIONS/CHANGES TO OFF   |                      |               |             |
| TITLE                          | PD  | L] DELETE   | 1.1 10                      |                      |  | L., C                | hange !       | Addition    |
| NAME                           | LA DUCA, NICHOLAS                                 |   | 1.2 NA                      |                      |  |                      |               |             |
| STREET ADDRESS                 | 1908 WOODSIDE CT                                  |   | 1.3 \$1                     | REET ADDRESS         |  |                      |               |             |
| Cify-St-ZiP                    | PLANT CITY FL                                     | T brierr  |                             | TY-ST-ZIP            |  |                      |               | T 4 3 100   |
| TITLE                          | VSD   | ☐ DELETE  | 2.1 111                     |                      |  | □ c                  | nange         | Addition    |
| NAME                           | LA DUCA, KATHY P.                                 |   | 2.2 NA                      |                      |  |                      |               |             |
| STREET ADDRESS                 | 1908 WOODSIDE CT                                  |   |                             | REET ADDRESS         | [;·  |                      |               |             |
| CITY-ST-ZIP                    | PLANT CITY FL                                     | Llociete  |                             | TY-ST-ZIP            |  |                      |               | 1 4 4 22    |
| TITLE                          |   | DELETE  | 3.1 111                     |                      |  |                      | hange         | Addition    |
| NAME                           |   |   | 3.2 NA                      |                      |  |                      |               |             |
| STREET ADDRESS                 |   |   |                             | REET ADDRESS         |  |                      |               |             |
| CITY-ST-ZIP                    |   | DELETE  | 3.4, Ci                     | TY-ST-ZIP            |  | Пс                   | hanne         | Addition    |
| TITLE                          |   | C' NETE)E   |                             | _                    |  | U V                  | manyo j       | THE VOILING |
| NAME<br>CARGET ADORAGE         |   |   | 4. 2 N                      |                      |  |                      |               |             |
| STREET ADORESS                 |   |   |                             | REET ADDRESS         |  |                      |               |             |
| CITY-ST-ZIP<br>TITLE           |   | DELETE  | 4.4 CI<br>5.1 TI            | ry-st-zip            | **************************************   | Пс                   | hange         | Addition    |
| NAME                           |   | L. DELETE   | 5.1 NA                      |                      |  |                      | mango (       | riduition   |
|                                |   |   |                             |                      |  |                      |               |             |
| STREET ADDRESS                 |   |   |                             | REET ADDRESS         |  |                      |               |             |
| CITY-ST-ZIP<br>TITLE           |   | DELETE  | 6.1 TI                      | TY-ST-ZIP            |  | □ c                  | hanne         | Addition    |
| NAME                           |   | ب مدیداد  | 6.2 NA                      | i                    |  | i v                  | ini i go      | AUGIGOT     |
|                                |   |   |                             |                      |  |                      |               |             |
| STREET ACCRESS                 |   |   |                             | REET ADDRESS         |  |                      |               |             |
| CITY-ST-ZIP                    | by certify that the information cumple            | ied with this filing does not ou                                  |                             | ry-St-ZIP            | ed in Section 119.07(3)(i), Florida Statut   | as I further corti   | fu that th    |             |
| informatic<br>Lam an c         | on indicated on this annual report of             | r supplemental annual report is<br>or the receiver or trustee emp | s true and a<br>owered to e | ccurate and tha      | at my signature shall have the same leg<br>ort as required by Chapter 607, Florida | al effect as if ma   | ide unde      | r oath: tha |