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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1824 N.E. JENSEN BEACH BLVD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Mailing Address

1824 N.E. JENSEN BEACH BLVD.

(4)

C & J D'AGATA, INC.

FILED Apr 21 1997 8:00am Secretary of State



JENSEN BEAC US	H FL 34957		JENSEN BEAC	H FL 34957-72	34					
·							03/12/1990 05/0		te of Last Report	
2. Principal P	lace of Busin	1055	2a. Mailing Ad	2a. Mailing Address			4. FEI Number Apr			olied For
21			26				65-0183285 Not Applie			Applicable
Suite, Apt. #, etc.			27	·			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			28				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24]		Country 25	Z(p)	3	Country O	<i>!</i> 	8. This corporation has liability for in Florida Statutes	ntangible tax u Yes 🔲 No		199.032,
		and Address of Curre	nt Registered Agen	it			10. Name and Address of New Reg	istered Agen	nt	
D'AC	GATA, C R				81	Name				
	S.E. SOLA			82 Street Add			dress (P.O. Box Number is Not Acceptab	e)		<u>-</u>
POH	II ST. LUCI	E FL 34952							··-· · · · ·	
					83					
					84	City		F 3 85	Zip Ci	ode
44 Dimension	to the ever int		00 1007 4500 51			<u> </u>			1	· · · · · · · · · · · · · · · · · · ·
office or r	to the provisi registered aga m familiar wit	ent, or both, in the Stati th, and accept the oblig	oz and 607.1508, FX o of Florida. Such ch pations of Section 60	orida Statutes, ange was aut 07.0505 - Florid	, the above horized by da Statulo	e-named coi / the corpora s	rporation submits this statement for the pa ation's board of directors. I hereby accep	urpose of char tithe appointm	nging its nent as re	registered egistered
SIGNATURE				·						
12.	Signature, typed	or printed name of registered ag	gent and title if applicable	(NOTE F		per stutsingia Inc	ured when reinstaling)	DATE		
TITLE	PS	OFFICERS AF		DELETE	13.		ADDITIONS/CHANGES TO OFFICE		ECTORS Change	
NAME		CHARLES R	L4	DECENE	1.2 NAME				mange	Addition
STREET ADDRESS		SOLANA LANE				1000000				
CITY-ST- ZIP		LUCIE FL 34952			1.3 STREET 1.4 CITY - S					
TITLE	VST			DELETE	2.1 TITLE	1-211			Change	Addition
NAME	D'AGATA,	JOYCE			2.2 NAME	İ			- nango	L.J MOOMON
STREET ADDRESS		JENSEN BEACH BL	.VD.		23 STREFT	ADDRESS	<i>;</i>			
CITY-ST-ZIP	JENSEN E	BEACH FL 34957			2 4 CITY-5					
TITLE				DELETE	3 1 THTLE				hange	Addition
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREET	ADDRESS				
CITY-ST-ZIP					3.4. CITY - 9	ST - 71P				
TITLE				DELETE	4.1 TITLE				hange	Addition
NAME					4. 2 NAME					
STREET ADDRESS					4.3 STREFT	ADDRESS				
ÇITY-ST-ZIP					4.4 CITY- S	1 - 7HP				
TITLE				DELETE	5.1 TITLE		-		hange	Addition
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET	ADDRESS				
CITY-ST-ZIP			···		5.4 CITY-S	T-ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE			LJ	DELETE	6.1 TITLE			□ C	hange	Addition
NAME					6.2 NAME					
STREET ADDRESS					6.3 STREET	ADDRESS				
CITY-ST-ZIP					64 CITY - ST	I - 71P				

I do hereby certify that the information supplied with this filling doos not qualify for the exemption stated in Section 119.07(3)(i), 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 tegal 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.