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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

L72918

(0)

FERSACI, INC.

## FILED Apr 15 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address						
10204 BELLHI	URST CT	10204 BELLHURST CT						
TAMPA FL 33615		TAMPA FL 33615		DO NOT WRITE IN TH	IS SPACE			
					3. Date Incorporated or Qualified			
					05/14/1990			
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	A	pplied For	
21		26/07/23 DAlton AU.			59-3013421		ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
22		27 TAMPA			a. Certificate of Status Desired	Fee Re	equired	
City & State	ө	City & State	٠. ١	1.	6. Election Campaign Financing	\$5.00	May Be	
23		28 33615	Hill	115	Trust Fund Contribution		to Fees	
Zip	Country	Zıp	Count	ry	8. This corporation owes or has paid the		<b>→</b> ~ I	
24	A Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registers		_1 No	
MI Name								
FERSAUI, GREGORT P.								
	204 BELLHURST CT		8	2 Street	Address (P.O. Box Number is Not Acceptable)		-	
IAI	MPA FL 33815		8	3				
			L		· · · · · · · · · · · · · · · · · · ·			
,			8	City		85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607,1508. Florida Statut	es, the abo	ve-named	corporation submits this statement for the purpose	of changing it	ts 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 of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOT	E Registered A	gent signature	e required when reinstating) DATE		<del></del>	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		Formaci X MOLORA P.	Change	L. Addition	
NAME	FERSACI, GREGORY P.		1.2 NAME		LAZZE COLLEGE	<i>)</i>		
STREET ADDRESS	10204 BELLHURST CT		1.3 STRE	T ADDRESS	~ / 20/1	300		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-		IAMPATTAL SAT			
TITLE		☐ DELETE	2.1 TITLE		Section 1	Change	Addition	
NAME		2.2						
STREET ADDRESS			2.3 STREET ADDRESS		. "			
CITY-ST-ZIP		DELETE	2. 4 CITY 3.1 TITLE			Change	Addition	
NAME			3.1 HILE 3.2 NAME			LI Change	Mudition [	
STREET ADDRESS			•	T ADDRESS	1		1	
CITY-ST-ZIP			3.4. CITY		·			
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HAME		<del></del> -	4. 2 NAM	E				
STREET ADDRESS				Taddress				
CITY-ST-ZIP			4 4 CITY					
TITLE		DELETE	5 1 TITLE			Change	Addition	
NAME			5.2 NAME			-	1	
STREET ADDRESS			5.3 STREE	T ADDRESS			1	
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP	 		6.4 CITY	ST-ZIP	<u> </u>			
14. I hereby o	certify that the information supplied w	with this filing does not qualify to	or the exem	ntion state	ed in Section 119.07(3)(i), Florida Statutes, I further	certify that the	information	

indicated on this annual report or supplemental annual report is frue 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 in the receiver or trustee en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, but in an attachment with an address.

MANATURE.

4/9/98

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