

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 18 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L76185

(2)

1. Corporation Name

ACAPULCO PROPERTIES, INC.

Principal Place of Business

**% JULIUS J. ZSCHAU
911 CHESTNUT ST.
CLEARWATER FL 34616
US**

Mailing Address

**% JULIUS J. ZSCHAU
911 CHESTNUT ST.
CLEARWATER FL 34616
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/29/1980

3a. Date of Last Report

07/08/1994

4. File Number

59-3012658

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$0.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

23. City & State

24. Zip

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

28. City & State

29. Zip

Country

9. Name and Address of Current Registered Agent

**ZSCHAU, JULIUS J.
28050 U.S. HWY 19 N.
SUITE 501, CORPORATE SQUARE
CLEARWATER FL 34621**

10. Name and Address of New Registered Agent

81. Name

Zschau, Julius J.

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

911 Chestnut Street

83.

84. City

Clearwater

FL

85. Zip Code

34616

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, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PO**
NAME **MALTA, NAPOLEAO**
STREET ADDRESS **3018 GIGER CT**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **STD**
NAME **MALTA, REGINA S.**
STREET ADDRESS **3018 GIGER CT**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **D**
NAME **ZSCHAU, JULIUS J.**
STREET ADDRESS **911 CHESTNUT ST.**
CITY-ST-ZIP **CLEARWATER FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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:

(Signature typed or printed name of signing officer or director)

NAPOLEAO L.C. MALTA