## FILE NOW: Fee after May 1, will be \$580.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS 1997 APR 14 AM 8: 40 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee FILING FEE Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 DOCUMENT #196000000229 Name and Mailing Address
of Limited Liability Company ia. Principal Place of Business Addres ACQUA AZZURO ENTERPRISES, LC 10568 WHOOPING CRANE WAY SAME PALM CITY, FLORIDA If above mailing address is incorrect in any way. Hine through incorrect information and enter correction in Block 2s. 3. Date Organized or Qualified 3s. State of Formation 2a. Mailing Address 2. Principal Place of Business **FLORIDA** 02/27/96 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State Not Applicable City & State 65-0650279 6. Certificate of Status Desired 5. Date of Last Report Country Country S8 75 Additional Fee Required TNTTTAT 8. Name and Address of New Registered Agent 7. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL. 32301 Suite, Apt. #, etc. 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. DATE SIGNATURE. (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) City, State and Zip Code **Business Street Address** Managing Members/Managers 10. Title 14 ATLANTIC DRIVE HUNTINGTON, NY 11743 MICHAEL POSILLICO MEM/ PTR BABYLON, NY 11702 68 THOMPSON AVENUE JOSEPH K. POSILLICO MEM/ PTR HUNTINGTON BAY, NY 11743 15 BEAUX ARTS LANE PAUL POSILLICO MEM/ PTR HUNTINGTON BAY, NY 11743 JOSEPH D. POSILLICO, III 15 BEAUX ARTS LANE MEM/ PTR

11. I do hereby certify that the information supplied with this filling does 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

INHSE10 R(12-96)