

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M02998** (6)

1. Corporation Name

POLLIO BUILDERS, INC.



Principal Place of Business

Mailing Address

**3255 NW 94 AVE #9422
CORAL SPRINGS FL 33065-5078**

**3255 NW 94 AVE #9422
CORAL SPRINGS FL 33065-5078**

2. Principal Place of Business

21 **4966 N.W. 96 DRIVE**

Suite, Apt. #, etc.

22

City & State

23 **CORAL SPRINGS**

Zip

24 **33076**

Country

25 **BROWARD**

2a. Mailing Address

26 **4966 N.W. 96 DRIVE**

Suite, Apt. #, etc.

27

City & State

28 **CORAL SPRINGS**

Zip

29 **33076**

Country

30 **BROWARD**

3. Date Incorporated or Qualified

07/23/1984

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2443139

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**POLLIO, STEVEN A.
3255 NW 94 AVE #9422
CORAL SPRINGS FL 33075**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
4966 N.W. 96 DRIVE

83

84 City

CORAL SPRINGS

FL

85 Zip Code

33076

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 of Section 607.0505, Florida Statutes.

SIGNATURE

STEVEN A. POLLIO

4/30/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P
POLLIO, STEVEN A.
3255 NW 94 AVE #9422
CORAL SPRINGS FL**

TITLE ☐ DELETE

**VS
POLLIO, PAMELA
3255 NW 94 AVE #9422
CORAL SPRINGS FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

**1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
4966 N.W. 96 DRIVE
CORAL SPRINGS, FL 33076**

☒ Change ☐ Addition

**2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
4966 N.W. 96 DRIVE
CORAL SPRINGS, FL 33076**

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

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:

STEVEN A. POLLIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

305 753 7742

CR2E034 (12/95)