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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

**FILED** May 18 1998 8:00am Secretary of State

JOHN P. MARINELLI, P.A.					
Principal Plac	e of Business	Mailing Address		- 1 10010011 110 14011 10010 01110 13010 11	BI BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL 1881
1815 FORUM	PLACE	1615 FORUM PLACE			
I 72		,38	****		W. T. VD 00 405
US		WEST PALM BEACH FL 3 US	3401	DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS SPACE
33				02/20/1986	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	_	26		59-2655423	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
	TE 500. B	27 SUITESO	U-D	5. Certificate of Statos Desired	Fee Required
City & Stat	c	Cily & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25]	h in h	— ´	8. This corporation owes or has pa	
<del>-</del>	9, Name and Address of Curren		30	Personal Properly Tax due June  10. Name and Address of New Re-	
M/	VRINELLI, JOHN P.	· · · · · · · · · · · · · · · · · · ·	81 Name		
1815-FORIU PLACE				ess (P.O. Box Number is Not Acceptab	(0)
<del>SUITE 3-B</del>			Jane Adding	S FOR UP 1 POPOS	10)
WE	EST PALM BEACH FL 33401		83	= 500-12	
			84 City	30-73	85 Zip Code
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. La	m familiar with, and accept the obliga	ations of Section 607.0505, Flor	ida Statutes.		and appointment as registered
SIGNATURE:	Signature, typed or printed harne of required age	of medition described by the Market	Registered Agest signature require		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE	7.15511101101011111111111111111111111111	Change Addition
NAME	Marinelli, John P.		1.2 NAME		
STREET ADDRESS	1615 FORUM PLACE, #3-B		1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY - ST - 2IP		
TITLE	D	☐ DELFTE	2 1 TITLE		Change Addition
NAME	MARINELLI, JOHN P.	^ D	2.2 NAME		
STREET ADDRESS	1615 FORUM PLACE, SUITE	<b>3</b> ∙p	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	WEST PALM BEACH FL	DELETE	2 4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	Observe Takenov
NAME		L_J VELETE	3 1 TITLE		Change Addition
Street address			32 NAME		
CITY-ST-ZIP			3 3 STREET ADDRESS  3 4. City-St-Zip		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 Tale		Change Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELĒTE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	6.4 CITY-ST - ZIP		

14. Thereby certify that the information supplied with this filing does not challify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this amount report or suppliemental around report is tryound occurate 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 of the corporation of the corporation of the receiver of the state of the second of the