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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

| DOCUMENT # M73528 (5) PICCIONI SERVICES, INC.  Principal Place of Business Mailing Address   |  |  |  |   |   |  |                              |  |
|--|--|--|--|---|---|--|------------------------------|--|
| % annelie Piccioni<br>18211 S.W. 113 avenue  |  | % Annelie Piccioni<br>18211 S.W. 113 Avenue<br>Miami Fl 33157-4925 |  |   |   |  |                              |  |
| MIAMI FL 33157   | MIAMI FL 3315  |  |  |   | Date Incorporated or Qualified                |  |                              | ort  |
|  |  |  |  | i   | 03/24/1988                                    | 04/26/   | ,                            |  |
| 2. Principal Place of Business   | 2a. Mailing Ad   | ldress   |  |   | 4. FEI Number                                 |  | <del></del>                  | ied For  |
| 1  | 26 Suite, Apt  | # oto  |  |   | 65-0033581                                    |  | Not A                        | Applicable   |
| Suite, Apt. #, etc.<br>2   | 27 Suite, Apr  | w, etc.  |  |   | 5. Certificate of Status Desired              |  | Fee Requ                     |  |
| City & State   | City & Stat  | 0  |  |   | 6. Election Campaign Financing                |  | <b>\$5.00</b> м              | lav Be   |
| 3  | 28   | ···  |  | •   | Trust Fund Contribution                       |  | Added to                     | Fees   |
| Zip Country  | Zip  |  | Country  | /   | 8. This corporation has liability for         |  |                              | 99.032,  |
| 9. Name and Address of C   | 29   |  | 30   |   | Florida Statutes  10. Name and Address of New | Yes N  |                              |  |
|  | Julient Hogistored Agen                                |  | 81   | Name  | 10. Table William Property of Control         |  |                              |  |
| PICCIONI, ANNELIE<br>18211 S.W. 113 AVENUE   |  |  | 82   | Stroot Add  | ress (P.O. Box Number is Not Accep            | table)   |                              |  |
| MIAMI FL 33157   |  |  |  | atteet Add  | ress (1 .O. DOX Hamber is Not Accep           |  |                              |  |
|  |  |  | 83   |   |   |  |                              |  |
|  |  |  | ļ <u>.</u>   | City  |   | , 8  | 5 Zip Co                     | xde  |
|  |  |  | 84   | T City  |   |  |                              |  |
| 11. Pursuant to the provisions of emions 60  | 07.0502 and 607.1508. Flo                              | orida Statute  | - 1  |   | poration submits this statement for th        | FL e purpose of ch   | anging its i                 | registered   |
| SIGNATURE  |  |  | es, the abov<br>authorized by<br>orida Statute   | e-named corp<br>y the corpora<br>s.   |   | e purpose of chi<br>cept the appoint                         | anging its i                 | registered<br>egistered                            |
| SIGNATURE Signature (1997 of inflied lianter) regul  | rerind agent and toe if applicable                     |  | es, the abov<br>authorized by<br>orida Statute   | e-named corp<br>y the corpora<br>s.   | ired when reinstating)                        | e purpose of ch<br>cept the appoint                          |                              |  |
| SIGNATURE Supratore Quarter Visid Rando di registi<br>12. OFFICER  | nernd agent and tice if applicable<br>RS AND DIRECTORS |  | es, the abov<br>authorized by<br>orida Statute   | e-named corp<br>y the corpora<br>s.   |   | e purpose of ch<br>cept the appoint<br>DATE<br>FICERS AND DI |                              | IN 12  |
| SIGNATURE Sugnature Country When have divergent  12. OFFICEF  D  | nernd agent and tice if applicable<br>RS AND DIRECTORS | (NOT)  | es, the above authorized by prida Statute for Registered Age 13.   | e-named corp<br>y the corpora<br>s.   | ired when reinstating)                        | e purpose of ch<br>cept the appoint<br>DATE<br>FICERS AND DI | RECTORS                      | IN 12  |
| SIGNATURE  Signature Control And Control Control  OFFICER  D  PICCIONI, ANNELIE  STREEF ADDRESS  18211 SW 113 AVENUE   | nernd agent and tice if applicable<br>RS AND DIRECTORS | (NOT)  | es, the above authorized by orida Statute  £ Registered Ag  13.  1.1 TITLE  1.2 NAME   | e-named corp<br>y the corpora<br>s.   | ired when reinstating)                        | e purpose of ch<br>cept the appoint<br>DATE<br>FICERS AND DI | RECTORS                      | IN 12  |
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| SIGNATURE  Signature Discrete Applied Register Control | eered agent and toe if applicable<br>RS AND DIRECTORS  | (NOT)  | es, the above authorized by oricle Statute  E Registered Ag  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-12 2.1 TITLE   | e-named corp<br>y the corpora<br>s.<br>ent signature requ   | ired when reinstating)                        | e purpose of ch<br>cept the appoint<br>DATE<br>FICERS AND DI | RECTORS                      | IN 12  |
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1/28/97 (305)2536348

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Feb 03 1997 8:00am

Secretary of State