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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(2)

D'AMICO ENTERPRISES, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								- 1 INDIADII III IDDII 18011 INDII ANDII AIGIID		L ALALI REBES ALI	Nie Memil (MM)	
1431 A CYPRESS DRIVE JUPITER FL 33469				1431 A CYPRESS DRIVE JUPITER FL 33469					DO NOT WRITE IN THIS SPACE			
UŞ				US					3. Date Incorporated or Qualified	<u> </u>	OI NOL	
									04/22/1988	•		
2. Principal P	lace of Business	············ []	2a. Mailing Address					4. FEI Number Applied For				
21			} −							65-0048171 Not Applical		
	# elc			Suite, Apt #, etc.					SS 75 Additio			
22			2	2a. Mailing 2b. 154 Suite, 7 Zip 29 33 nt Registered A. 27 City 8 28 Tu 29 Section of Florida. Such pations of, Section of John Crown of Section of John Crown of Sections of					5. Certificate of Status Desired			Required
	е				& State				6. Election Campaign Financing		\$5.00	May Be
23			2	8 –J	U PIECE	ε,	F	- /	Trust Fund Contribution			to Fees
Zip Country				Zip				,	8. This corporation owes or has	paid the cu	rrent year Ir	ntangible
24	25					30			Personal Property Tax due Jur	ie 30.	Yes Yes	☐ No
	9. Name an	d Address of Cur	rent Re	gistered	1 Agent		<u> </u>	T	10. Name and Address of New F	legistered	Agent	
1431 A CYPRESS DRIVE JUPITER FL 33469 US 2. Principal Place of Business 3. Principal Place of Business 3. Principal Place of Business 3. Principal Place of Business 4. Principal Place of Business 5. Principal Place of Business 6. Principal Place o							81	Name				
150 STONEBRIAR BLVD							82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
JU	PITER FL 3345	58					L					4
							83					
							84	City			85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, tyred or printed name of registered agent and interflapplicable. (NOTE Registers) 12. OF FICERS AND DIRECTORS 13.			•			FL	.					
office or r	registered agent	, or both, in the St	ate of Flo	orida. Si	uch change was	s authorize	d b	y the corporation	oration submits this statement for the on's board of directors. I hereby acc	purpose c ept the app	f changing cointment a	its registered s registered
SIGNATURE		·	.,									
Oldivitorie	Signature, typed or p	rinted name of registered	Lagent and	ide if appli	maple (N	OTE. Rogistere	d Ag	ent signature required		DATE		
		OFFICERS.	VND DIE	RECTOR		13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	_				☐ DELETE	1.1 T	TLE				L Change	Addition
NAME						1.2 N	AME					
STREET ADDRESS						1.3 \$	TREET	ADDRESS				
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NAME	1.					6.2 N						
STREET ADDRESS								ADDRESS				
CITY-ST-ZIP						6 4 C	ITY - 8	61-7IP				

14. Thereby certify that the information supplied with this filing 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 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 own altachment with an address.