2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000087457

1. Entity Name
GIOVANNONE REALTY CORP.

Principal Place of Business	Mailing Address
2727 S. OCEAN BLVD., #802 HIGHLAND BCH, FL 33487	2727 S. OCEAN BLVD., #802 HIGHLAND BCH, FL 33487

y4U8UUUj

DO NOT WRITE IN THIS SPACE

04212004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
14-1466584	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

---

6. Name and Address of Current Registered Agent

PERRY, MARK A
50 S.E. 4TH AVE
DELRAY BEACH, FL 33483

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.　　(NOTE: Registered Agent signature required when reinstating)　　DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2004 Fee will be $550.00	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.　　OFFICERS AND DIRECTORS

TITLE	PD
NAME	GIOVANNONE, FRANK A
STREET ADDRESS	2727 S. OCEAN BLVD., #802
CITY-ST-ZIP	HIGHLAND BCH, FL 33487

TITLE	STD
NAME	GIOVANNONE, JOAN A
STREET ADDRESS	2727 S. OCEAN BLVD., #802
CITY-ST-ZIP	HIGHLAND BCH, FL 33487

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   4/28/04   561-272-4801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR　　　Date　　Daytime Phone #