

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90026 028 ***150.00

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1. Entity Name
NICASSIO CORPORATION SOUTH



Principal Place of Business
721 US HWY ONE STE 223/224
N PALM BCH, FL 33408

Mailing Address
721 US HWY ONE STE 223/224
N PALM BCH, FL 33408

94023873



DO NOT WRITE IN THIS SPACE

02052004 No Chg-P CR2E034 (10/03)

4. FEI Number
11-3657813

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ZEHMER, JOHN H. *should be:*
818 A1A NORTH, STE. 301 *822 A1A North*
PONTE VEDRA BEACH, FL 32082 *Suite 315*
Ponte Vedra Beach, FL 32082

**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 *John Zahmer*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/26/04

**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 D
NAME NICASSIO, LOUIS V
STREET ADDRESS 9979 CAPRI CT
CITY-ST-ZIP PITTSBURGH, PA 15239

TITLE D
NAME FLEMING, JEFFREY
STREET ADDRESS 243 SHUSTER RD
CITY-ST-ZIP GIBSONIA, PA 15044

TITLE D
NAME BALOGH, STEVE
STREET ADDRESS 11854 KESWICK WAY
CITY-ST-ZIP W PALM BCH, FL 33412

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:

L. V. Nicassio

Louis V. Nicassio

2-9-04

412-287-4991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #