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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P30951

1. Corporation Name:

(8)

Mailing Address

GARY J. PALMIROTTO, INC.

Principal Place of Business

Feb 25 1997 8:00am Secretary of State

FILED



5275 BABCOCK #11=140	2536 TANGERINE STN.E. PALM BAY FL 32905-4728								
PALM BAY FL	22905					3. Date Incorporated or Qualified 09/13/1990		te of Last Ri	eport
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number			plied For
	C BABCOCK ST NE	26			14-1638127			t Applicable	
Suite, Apt.	8 - 108	Surte, Apt. #, etc.			5. Certificate of Status Desired		Fee Required		
<u> </u>	alm Bray FL	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24 339905 25 BREVIARD 29 ZIP			Gountry 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
9. Name and Address of Current Registered Agent					Name	10. Name and Address of New Re	jistered /	4gent	
PALMIROTTO, GARY, J				81	ivanie				
2536 TANGERINE ST NE PALM BAY FL 32905				82 Street Address (P.O. Box Number is Not Acceptable)					
Ì				83					
				64	City		FL	.	Code
11. Pursuant	to the provisions of Sections 607 0502 edistered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the at	oove	named o	corporation submits this statement for the population's board of directors. Thereby accept	urpose of	changing it	s registered registered
11. Pursuaril 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. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.									
SIGNATURE.		t and title if applicable. (NO	TF: Banistered	1 Acec	it signature re	equired when reinstating)	DATE	71	
12.	OP ICERS AND		13.	ı ngei	a digitatore in	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TIIE	PCD	DELETE	1.1 70	LE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	PALMIROTTO, GARY J.		1.2 NA	MÉ					
STREET ADORESS	2536 TANGERINE ST., NE		1.3 \$1	REET A	ADDRESS	·			
CHY-S1 20°	PALM BAY FL	DECETE	1.4 CI		- ZiP			1 1 0	
TITLE	DALLHINGTO CARV I			ſιŧ				Change	Addition
NAME	2538 TANGERINE ST., NE		2.2 NA		I DDDDEGG				
STREET ADDRESS OTTY-ST_ZIP	PALM BAY FL		2.4 C		ADDRESS				
TITLE	ST	DELETE	3.1 TI		1-215			Change	Addition
NAME	PALMIROTTO, GARY J.		3.2 NA	ME					
STREET ADDRESS	2536 TANGERINE ST., NE		3.3 ST	REET A	ADDRESS	•			
City-St-ZiP	PALM BAY FL		3.4. C	ITY-S	7 - ZIP				······································
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NAME			4. 2 N		İ				
STREET ADDRESS					ADDRESS [
TITLE		DELETE	5.1 Tri	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-ZIP			Change	Addition
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STREEL ADURESS					ADDRESS				
CITY - ST - ZIP			5.4 CI						
THLF		☐ DELETE	6 1 TF					Change	Addition
NAME			6.2 NA	AME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY - ST - ZIP	<u> </u>		64 CI	ty - St	- 219				

14. I do 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 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 regulred by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

AME OF SIGNING OFFICER OF DIRECTOR

Date

Phone #