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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P92000010071 (8)

GIUSTINO J. BRUSCA, INC.

	a of Divelopes	N. C A (
•	e of Business	Mailing Address			
1622 LATHAN ROAD APT 5 WEST PALM BEACH FL 33409		1622 LATHAM ROAD APT 5			
		WEST PALM BEACH FL 3	33409-5132		
US		US		3. Date Incorporated or Qualified 12/04/1992	3a. Date of Last Report 07/23/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 01 2.1.C	GATEWAY ROAD	26 1210 GATE Suite. Apt. #, etc.	WAY ROAD	65-0384226	Not Applicable
	re_# 6	Suite. Apt. #, etc. 27 SUITE # 6		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 LAKE	E_PARKFL	28 LAKE PARK		Trust Fund Contribution	Added to Fees
— ^{Zip} ეექტ	Country P.B.	33403	Country P.B.	8. This corporation has liability for in	
24 3340		[29]	30 F.B.		Yes No
14.00-4	9. Name and Address of Co	urrent Registered Agent	na Name	10. Name and Address of New Rec	Jistered Agent
	ST-BRUSCA, PATRICIA E		81 Name		
	LAUREL OAKS WAY		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
	*************	*********		LAUREL OAKS WAY	**************************************
(334	58ER FL 33480		83 279	DAUKEL CAKS WAI	
			84 City		85 Zip Code
·····			1 1 ´	די סייד	
11. Pursuant t	to the provisions of Sections 607	7.0502 and 607.1508, Florida Statut	tes, the above-named corrects	TTFR FI poration submits this statement for the pi ation's board of directors. I hereby accep	urpose of changing his registered
ecot to	m amiliar with and accept the	obligations of, Section 607.0505, Flo	authorizeu by ine compora oriela Statutaet	mons board of directors, i hereby accep-	t the appointment as registered
agent. rai	grande the first the second to the second	<u></u>	Ospila Olatusey.		
SIGNATURE	- Sature	196 11 last	1 Brus	Re/	
SIGNATURE	Signature type Anticolida	and a stroute a application (NO)	It.: Registered Agent signature requ		DATE 4/29/9>
SIGNATURE	Supraise Types Ames hand of Ames OFFICERS	S AND DIRECTORS	In: Register of Agent signature requ	olred when reinstelling) ADDITIONS/CHANGES TO OFFICE	
SIGNATURE 12.	OFFICERS	S AND DIRECTORS	It: Register & Agent Signature required 13.		DATE # 2 9 9 PERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME	OFFICERS DPS WEST-BRUSCA, PATRICIA	S AND DIRECTORS	11. Registered Agent signature required 13. 1.1 TILLE 1.2 KAME		
SIGNATURE 12. TITLE NAME STREET ADDRESS	OFFICERS DPS WEST-BRUSCA, PATRICIA 279 LAUREL OAKS WAY	S AND DIRECTORS	It: Register & Agent Signature required 13.		
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS DPS WEST-BRUSCA, PATRICIA 279 LAUREL OAKS WAY JUPITER FL	S AND DIRECTORS DELETE	11. Register & Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-7IP		☐ Change ☐ Addition
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