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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Mar 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000011617 (7)

HIGH PINE, INC.

Principal Place of Business Mailing Address P.O. BOX 574842 7716 HIGH PINE RD ORLANDO FL 32857-4842 ORLANDO FL 32819 US 3. Date Incorporated or Qualified 3a. Date of Last Report 12/14/1992 06/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 56-0561350 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** 23 28 Country Country 2)0 Zip 8. This corporation has liability for intangible taxunder s. 199.032. 30 Florida Statutes Yes No 25 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLER, BARRY I ESO 231 E. MARKS STREET Street Address (P.O. Box Number is Not Acceptable) 82 P.O. BOX 1966 83 ORLANDO FL 32802 84 City Zip Code 85 11. Pursuant to the provisions of Sections 697.0502 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. I am familiar with land accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typical or pentical narrie of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)☐ DELETE Change Addition THEF 1.1 TITLE PANDOLFI, CLAUDIA NAME 1.2 NAME 7716 HIGH PIME RD 13 STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 14 CITY-ST-ZIP CEY-SI-7/2 DELETE Change Addition VSTD 21 TITLE Till F PANDOLFI, FLAVIO 22 NAME NAME 7716 HIGH PINE ROAD 23 STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 2 4 CiTY- ST-ZiP CHY-\$I Change DELETE Addition 31 TITLE THE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CHY-ST-74P 34. CITY-ST-ZIP DELETE 41 TITLE Change Addition 111.6 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP 001Y+S1+209 DELETE Change Addition 5 1 TITLE 10.6 5.2 NAME NAME 5.3 STREET ADDRESS SUREET ADDRESS 5.4 CITY-ST-ZIP CITY - \$1 - 7/P DELETE Addition 6.1 TITLE 1116 NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this firing 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 trusteel 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 on an attachment with an address.