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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000010840 (5)

Principal Place 3821 SE 4 AVE NAPLES FL 338		Mailing Address 3821 SE 4 AVE NAPLES FL 34117-3767					
				,	rated or Qualified	3a. Date of Last F	Report
2. Princina Pi	lace of Business	2a. Mailing Address		02/08/1993 4. FEI Number	<u> </u>	03/13/1996	pplied For
21	aco or Established	26		65-03875	<b>.97</b>	<del></del>	lot Applicable
Suite, Apt. #. etc		Suite, Apt. #, etc.				É0.75	Additional
[22]		27			Status Desired		lequired
City & State		City & State	r		6. Election Campaign Financing \$5.00 May Be		
23		28		Trust Fund Co		<del></del>	to Fees
[ Ζφ [ ]	Country	Zip	Country			intangible tax under s	s. 199.032,
24	25 25 9. Name and Address of Curre	29 3	0	Florida Statut	es ddress of New Reg	Yes No	L-T
DIAC		it neglistered Agent	81 Name	_	A .	Aleteien Wanit	
	BIOTTI, MARK A I SE 4 AVE			Biagolti,	Michael	<u>L.</u>	
	LES FL 33964		82 Street	Address (P.O. Box Numb	er is Not Acceptable	ole) Do. (	
Nor	LEG 1 E 33904		83	BIDYS COMM	wciai Ite	24	
}							
			84 City	Soca Ruton		FL 85 Zip	Code 33486
11. Pursuant	to the provisions of Sections 607.87.	J2 and 607.1508, Florida Statutes	, the above-named	corporation submits this	statement for the p	urpose of changing i	its registered
office or r agent 1 a	to the provisions of Sections 607.00 egistered agent of the first State in familiar with approach ne oblig	: of Florida. Such change was aut lations of, Section 607,0505. Florid	thorized by the corp da Statutes.	oration's board of direct	ors. I hereby accep	ot the appointment as	s registered
SIGNATURE _	Attait 1	MICH				4/28/47	
SIGIVATOR:	Signature types or printed name of registered ag-	ent and title if applicable. (NOTE: F	Registered Agent signature			DATE DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CI	HANGES TO OFFICE	ERS AND DIRECTOR	
TITLE	PIACIOTTI MARRIE A	☐ DELETE	1.1 TITLE		or A	Change	Addition
NAME	BIAGIOTTI, MARK A		1.2 NAME	BIAGIOTTI, MA 1000 Seminole	Omn of		
STREET ADDRESS	3821 SE 4 AVE NAPLES FL 33964		1.3 STREET ADDRESS	• •			
CITY-ST-ZIP TITLE	HAFLES FL 33804	☐ DELETE	1.4 CITY-ST-ZIP 21 TITLE	CA Grange, C	A 30040	Change	Addition
NAME		C Differe	2 2 NAME	BLACKOTTI, MIC	H46/_ /_	L Change	Addition
STREET ADDRESS			2.3 STREET ADDRESS	21045 Commerci			
CITY - \$1 - ZIP			2 4 CITY-ST-ZIP	Boca Roton,		÷la	
TITLE		DELETE	3.1 TITLE	LOCAL ITARION,	PC 33 11	Change	Addition
NAME		=	3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY ST-ZIP			3 4. CITY - ST- ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STHEET ADDRESS			4.3 STREET ADDRESS				
C(TY - ST - 7)P			4.4 CITY - ST - ZIP				
THLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CHY-ST-ZiP		Driett	5.4 CITY - ST - ZIP			7 05	jane.
THEF		DELETE	6.1 TITLE			Change	Addition
NAME CTREET ATTORISES			6.2 NAME				
STHEEL ADDRESS			6.3 STREET ADDRESS				

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 of t

Socretary, MicHAEL BA GOOTI Y28/67 501-392-2300