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

Mailing Address

791 10TH ST. SOUTH

NAPLES FL 34102-6725

DELETE

DELETE

DELETE

DELETE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

791 10TH ST. SOUTH

NAPLES FL 32040

TITLE

NAME

THILE

NAME

THE

NAME

NAME

STREET ADDRESS City-St-ZiP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-51-7IF TITLE

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047989 (7)

SOLDAVINI, UPHAM & COMPANY, P.A.

34102 3a. Date of Last Report 3. Date Incorporated or Qualified 07/08/1993 02/20/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0420732 21 Not Applicable Suito, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Zip Country Country 6. This corporation has liability for intengible tax under s. 199.032, Yes No 25 29 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent (LIPHAM) LAURA UPHAM 791 10TH STREET SOUTH fix spelling 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 NAPLES FL 33940 34102 City 84 85 Zip Code 11. Pursuant 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or punted native of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) Change DELETE 1.1 TITLE TITLE UPHAM, LAURA NAME 1.2 NAME 791-10TH AVE. SOUTH, SUITE A STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34102 CITY-ST-7P 1.4 CITY-ST-ZIP DUCE DELETE 21 TITLE Change ___ Addition SOLDAVINI, MATTHEW 22 NAME NAME 791-10TH AVE. SOUTH, SUITE A STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 33940 34102 CITY - ST - ZIP 2. 4 CITY-ST-ZIP

3 1 TITLE

3.2 NAME 3.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

62 NAME

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5 4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 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.

SIGNATURE: Laura B. Lishath III

FILED

Feb 04 1997 8:00am

Secretary of State

Change

Change

Change

Change

Addition

Addition

☐ Addition

Addition