SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000054235 (5)

BILOTTI, INC.

Principal Place of Business

8903 GLADES RD D7		6	4793 N CONGRESS AVE			
BOCA RATON FL US	33434	Lantana FL 33462 Us			3. Date incorporated or Qualified 08/03/1993	3a. Date of Last Report 04/25/1995
2. Principal Place	e of Business	2a. Mailing 26 /99/		LANTE PL.	4. FEI Number 65-0422777	Applied For Not Applicable
Suite, Apt #, e	etc	Suite, A	pt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & S 28 Boc	tate A RATOA	I, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z ip 24	Country 25	Zip 29 334	34 3	Ocuntry OF PALM BEACH		Yes No
STELLI	9. Name and Address of Curr INO, SALVATORE I CONGRESS AVE	ent Registered Ag	ent	81 Name BILO	10. Name and Address of New Reg TT/ Joseph less (FO, Box Number is Not Acceptable Y/CCA CANTE LU	e)
LANTA	NA FL 33462			83 84 City BocA	RATON	FL 85 Zip Code
office or regis agent. I am fi SIGNATURE	stered agent, or both, in the Sta amiliar with, and accept the obl	te of Florida, Suchi-	shange was auti 607,0505 Florid	norized by the corporatio	oration submits this statement for the punis board of directors. Thereby accept	the appointment as registered
12.		NO DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	<u> </u>		DELETE	1 1 101LF	YTSD	Change Additio
NAME	STELLINO, SALVATORE			12 NAME B	ILOTTI, JOSEPH 1914 VILLA LANTE 1 OCA RATON, FL 33	_
	1793 N CONGRESS AVE ST	TE 6		13 STREET ADDRESS 19	1914 VILLA LANTE 1	LACE
	LANTANA FL			14 CHTY - ST - ZIF	OCA RATON, FL 33	434
TITLE			DELETE	2 I TILLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET ADDRESS		
CHY-ST-ZIP				2 4 City - ST - ZiF		
TITLE			DELETE	3 1 11115		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET ADDRESS		
City - St - ZiP				34 City - ST - ZIP		
TITLE			DELETE	4 1 TITLE		Change Additi

CITY-ST-ZIF 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.3 STREET ADORESS

4.4 City - ST 2IP

5 4 Cily - \$1 - 7iP

5.1 TITLE 5.2 NAME 5.3 SPILLET ADORESS

61 Tille

6 2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CHTY - ST - ZIP

THILE

CITY-ST-ZIF

DELETE

DELETE

6-21-96

FILED

Secretary of State

Aug 05 1996 8:00 am

407483796Z

Change Addition

Change Addition