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FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000057191 (7)

1. Corporation Name

KLAUBER & BOTTI, INC.



Principal Place of Business

Mailing Address

1620 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228

C/O STEPHEN J. MITCHELL
P.O. BOX 3433
TAMPA FL 33601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1993

4. FEI Number

65-0442907

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KLAUBER, MURRAY J
1620 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME KLAUBER, MURRAY J
STREET ADDRESS 1620 GULF OF MEXICO DR.
CITY-ST-ZIP LONGBOAT KEY FL 34228

1.1 TITLE ☐ Change ☐ Addition

TITLE DT ☐ DELETE

NAME KLAUBER, SUSAN B
STREET ADDRESS 1620 GULF OF MEXICO DRIVE
CITY-ST-ZIP LONGBOAT KEY FL 34228

2.1 TITLE ☐ Change ☐ Addition

TITLE DVP ☐ DELETE

NAME BOTTI, ITALO G
STREET ADDRESS 3104 OSPREY AVENUE
CITY-ST-ZIP SARASOTA FL 34239

3.1 TITLE ☐ Change ☐ Addition

TITLE DS ☐ DELETE

NAME BOTTI, LYNN
STREET ADDRESS 3104 OSPREY AVENUE
CITY-ST-ZIP SARASOTA FL 34239

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 registered agent 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, as changed, or on an attachment with an address.

MURRAY J. KLAUBER

CR2E034 (10/97)