

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra L. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072515 (8)

1. Corporation Name

GIOIA, INC.



Principal Place of Business

231 OSCEOLA WAY
PALM BEACH FL 33480

Mailing Address

231 OSCEOLA WAY
PALM BEACH FL 33480

3. Date Incorporated or Qualified
10/13/1993

3a. Date of Last Report
03/02/1995

2. Principal Place of Business

21 State, Apt. #, etc.
22 City & State
23 Zip Country

2a. Mailing Address

26 State, Apt. #, etc.
27 City & State
28 Zip Country

4. FEI Number

65-0446387

Applied For

Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRCMC, INC.
1401 FORUM WAY
SUITE 700
WEST PALM BEACH FL 33401

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 607.002 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

As a corporation, the corporation is authorized to file this statement.

As an individual, the agent is authorized to file this statement.

DAT

12. OFFICERS AND DIRECTORS

12	OFFICERS AND DIRECTORS	13	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1	NAME: PD LONGO, MICHAEL A	1	TITLE
2	STREET ADDRESS: 231 OSCEOLA WAY	2	NAME
3	CITY, ST, ZIP: PALM BEACH FL 33480	3	STREET ADDRESS
4	TITLE	4	CITY, ST, ZIP
5	NAME: TD LONGO, VIRGINIA	5	TITLE
6	STREET ADDRESS: 231 OSCEOLA WAY	6	NAME
7	CITY, ST, ZIP: PALM BEACH FL 33480	7	STREET ADDRESS
8	TITLE	8	CITY, ST, ZIP
9	NAME:	9	TITLE
10	STREET ADDRESS:	10	NAME
11	CITY, ST, ZIP:	11	STREET ADDRESS
12	TITLE	12	CITY, ST, ZIP
13	NAME:	13	TITLE
14	STREET ADDRESS:	14	NAME
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97	NAME:	97	TITLE
98	STREET ADDRESS:	98	NAME
99	CITY, ST, ZIP:	99	STREET ADDRESS
100	TITLE	100	CITY, ST, ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/96

407-844-2148

CR2E034 (12/95)