

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000078/99**

1. Corporation Name

TRIBORO WHOLESALE, INC.

Principal Place of Business

Mailing Address

**7071 WEST COMMERCIAL BLVD.
SUITE 2FG
TAMARAC, FL 33319**

3. Date Incorporated or Qualified

11/1~1993

3a. Date of Last Report

5/19/95

2. Principal Place of Business

2a. Mailing Address

21

26

4. FET Number

65-0463260

Applied For

No: Applicable

22

27

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

23

28

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

24

29

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

81

Name

CT CORPORATION SYSTEM

82

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

1700 S. PINE ISLAND RD.

83

84

City

PLANTATION

FL

85 Zip Code

33324

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 must be printed or typed and signed by the officer or director.

Date: Register Agent signature required when necessary.

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**01V
CONIGLIO, LOUIS J.
7007 WOODBRIDGE CIR.
BOCA RATON, FL 33434**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**01V
CONIGLIO, MARY
7007 WOODBRIDGE CIR.
BOCA RATON, FL 33434**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**01V
CONIGLIO, ROSARIO
7007 WOODBRIDGE CIR.
BOCA RATON, FL 33434**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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*****225.00**

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

ROSARIO CONIGLIO

5/6/96

SC-5-13-96

CR2E034 (12/95)