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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000080516 (6) DOCUMENT # Corporation Name

YANCHITIS FLO	ORIDA ENTERPRISES, I	INC.
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Principal Place of Business Mailing Address 775 N ALT. ATA 775 N ALT. A1A JUPITER FL 33477 JUPITER FL 33477 3. Date incorporated or Qualified 3a. Date of Last Report 11/17/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0450904 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Γ 28 Trust Fund Contribution Added to Fees Zip Ζıp Country 8. This corporation has liability for intangible tax under s 199,032, Florida Statutes X Yes \[\subsetence No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YANCHITIS, EDWARD L Street Address (P.O. Box Number is Not Acceptable) 82 226 GOLFVIEW DR **TEQUESTA FL 33469** 83 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if appl. (a)46. (NOTE: Bagistered Agent signature required when reinstance) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 THE ☐ Change Addition YANCHITIS, EDWARD L NAME 1.2 NAME 775 N ALT A1A STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP 1.4 C(TY-ST-7/P TITLE DELETE 2 1 TITLE Change ☐ Addition YANCHITIS, DOROTHIANNE NAME 2.2 NAME STREET ADDRESS 775 N ALT A1A 2.3 STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP 24 CITY-ST-ZIP TITLE DELETE: 3 1 TITLE Addition Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - \$1 - ZIP TITLE DELETE 4. 1 Till. E Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6 1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 indigitated 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 appears in Block 12 or Block 13 / changed, or on an attackment with an address.

n attachment with an address.

GNING OFFICER OR DIRECTOR

NATURE AND TYPED OR PRINTED NAME OF SIGNING

CR2E034 (12/95)