

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000085184 1. Entity Name 1957 HOLDINGS INCORPORATED	
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Principal Place of Business 1216 W WASHINGTON ST ORLANDO, FL 32805	Mailing Address 1216 W WASHINGTON ST ORLANDO, FL 32805 US
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DO NOT WRITE IN THIS SPACE

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01112007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3216171	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CRISANTE, MICHAEL C JR
1216 W WASHINGTON STREET
ORLANDO, FL 32805

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *m c* Michael Crisante 1-12-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000590603 01/18/07-30063-009 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CRISTANTE, JR, MICHAEL C 1216 W WASHINGTON STREET ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CRISANTE, TIMOTHY 1216 W. WASHINGTON STREET ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CRISANTE, ELIZABETH 1216 W. WASHINGTON STREET ORLANDO, FL 32805
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: *m c* Michael Crisante 1-12-07 407-2/20-6522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #