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Feb 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000001924 (7)

1. Corporation Name  
A. G. KOCSIS, INC.



Principal Place of Business  
1961 ROOKERY BAY DR.  
APT. 405  
NAPLES FL 33961

Mailing Address  
1961 ROOKERY BAY DR.  
APT. 405  
NAPLES FL 34114-9350

3. Date Incorporated or Qualified 01/07/1994  
3a. Date of Last Report 03/07/1996

4. FEI Number 65-0466330  
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

2. Principal Place of Business  
21 10661 Regent Cir.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 10661 Regent Cir.  
Suite, Apt. #, etc.

22 City & State  
23 Naples FL

27 City & State  
28 Naples, FL

24 34109 Country

29 34109 Country

25

30

9. Name and Address of Current Registered Agent

KOCSIS, AKOS G  
1961 ROOKERY BAY DR.  
#405  
NAPLES FL 33961

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 10661 Regent Circle  
84 City Naples FL 85 Zip Code 34109

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

TITLE	P	DELETE
NAME	KOCSIS, AKOS G	
STREET ADDRESS	1961 ROOKERY BAY DR #405	
CITY-ST-ZIP	NAPLES FL	
TITLE	VP	DELETE
NAME	KOCSIS, ERIKA	
STREET ADDRESS	1961 ROOKERY BAY DR, #405	
CITY-ST-ZIP	NAPLES FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS	10661 Regent Circle	
1.4 CITY-ST-ZIP	NAPLES, FL 34109	
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS	10661 Regent Circle	
2.4 CITY-ST-ZIP	NAPLES, FL 34109	
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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]* 2-19-97 941-514 4119  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)