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May 04, 1999 8:00 am
Secretary of State

05-04-1999 90195 020 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94000004081

1. Corporation Name

A - SALO & SALO, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

516 S.E. 28TH TERRACE
 CAPE CORAL FL 33904

Mailing Address

516 S.E. 28TH TERRACE
 CAPE CORAL FL 33904

3. Date Incorporated or Qualified

01/10/1994

2. Principal Place of Business

21 7170 NALLE GRADE RD.

2a. Mailing Address

26 7170 NALLE GRADE RD.

4. FEI Number

65-0463450

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

23 N. FT. MYERS FL.

City & State

28 N. FT. MYERS FL.

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip Country

24 33917 25 USA

Zip Country

29 33917 30 USA

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

SALO, DAVID
 516 S.E. 28TH TERRACE
 CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

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 607.0502 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 DELETE

NAME: SALO, DAVID
 STREET ADDRESS: 516 S.E. 28TH TERR.
 CITY-ST-ZIP: CAPE CORAL FL 33904

TITLE DELETE

NAME: SALO, JOHN
 STREET ADDRESS: 15171 BAIN RD.
 CITY-ST-ZIP: FORT MYERS FL 33908

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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: 7170 NALLE GRADE RD.
 1.4 CITY-ST-ZIP: N. FT. MYERS, FL. 33917

2.1 TITLE Change Addition

2.2 NAME
 2.3 STREET ADDRESS: 2808 SW 17th PLACE
 2.4 CITY-ST-ZIP: CAPE CORAL, FL. 33914

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 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, with all other like empowered.

SIGNATURE 4/23/99 941-731-3133
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)