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FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000015680 (9)

1. Corporation Name

NUVISTA DEVELOPMENT CORP.



Principal Place of Business

16520 S. TAMiami TRAIL, #18
FT. MYERS FL 33908

Mailing Address

16520 S TAMiami TRAIL
#18-270
FT. MYERS FL 33908
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/24/1994

4. FEI Number

65-0586079

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 6211 COCOS DR.

Suite, Apt. #, etc.

22

City & State

23 FT. MYERS FL

Zip

24 33908

Country

25 US

2a. Mailing Address

26 6211 COCOS DR.

Suite, Apt. #, etc.

27

City & State

28 FT. MYERS FL

Zip

29 33908

Country

30 US

9. Name and Address of Current Registered Agent

GADIGIAN, NADA
6211 COCOS DRIVE
FT. MYERS FL 33908

10. Name and Address of New Registered Agent

81 Name

GERARD GADIGIAN

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

6211 COCOS DR.

83

FT. MYERS FL 33908

84 City

FT. MYERS

FL

85 Zip Code

33908

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

Gerard Gadigian

GERARD GADIGIAN

5-26-98

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 PT ☐ DELETE
NAME GADIGIAN, NADA
STREET ADDRESS 6211 COCOS DRIVE
CITY-ST-ZIP FORT MYERS FL

TITLE VP ☐ DELETE
NAME WEBER, LEO
STREET ADDRESS 4065 BRIARWOOD AVENUE
CITY-ST-ZIP SEAFORD NY

TITLE S ☐ DELETE
NAME GADIGIAN, GERARD
STREET ADDRESS 6211 COCOS DR.
CITY-ST-ZIP FT. MYERS 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 P ☒ Change ☐ Addition
1.2 NAME GADIGIAN GERARD
1.3 STREET ADDRESS 6211 COCOS DR.
1.4 CITY-ST-ZIP FT. MYERS FL 33908

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE S ☒ Change ☐ Addition
3.2 NAME NADA GADIGIAN
3.3 STREET ADDRESS 6211 COCOS DR.
3.4 CITY-ST-ZIP FT. MYERS FL 33908

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.

GERARD GADIGIAN

CR2E034 (10/97)