

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000018463 (7)**

1. Corporation Name:

CORRINE'S CAFE, INC.



Principal Place of Business

**915 MIDDLE RIVER DRIVE
STE. 110
FORT LAUDERDALE FL 33304**

Mailing Address

**915 MIDDLE RIVER DRIVE
STE. 110
FORT LAUDERDALE FL 33304**

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

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30

3. Date Incorporated or Qualified

03/04/1994

3a. Date of Last Report

06/12/1995

4. FEI Number

65-0473886

Applied For

Not Application

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

9. Name and Address of Current Registered Agent

**PETILLO, CORRINE T
915 MIDDLE RIVER DRIVE
STE. 110
FORT LAUDERDALE FL 33304**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 of corporation, authorized officer or director, or other person

State Registered Agent Signature (required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **PETILLO, CORRINE T**
STREET ADDRESS **915 MIDDLE RIVER DRIVE STE. 110**
CITY-STATE-ZIP **FORT LAUDERDALE FL 33304**

☐ DELETE

TITLE **D**
NAME **PETILLO, FRANK T JR.**
STREET ADDRESS **6801 BRIDLEWOOD COURT**
CITY-STATE-ZIP **BOCA RATON FL 33433**

☐ DELETE

TITLE
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CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

☐ Change ☐ Addition

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 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:

Corrine T. Petillo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/96 954 568-0416
Daytime Phone #

CR2E034 (12/95)