

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000020632 (3)

1. Corporation Name

A.R. MORABITO, INC.

Principal Place of Business

3100 NORTH ROAD
NAPLES FL 33942

Mailing Address

3100 NORTH ROAD
NAPLES FL 33942

95 APR 27 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1994

3a. Date of Last Report

2. Principal Place of Business

21 777 109th Ave. N.

25. Mailing Address

26 777 109th Ave. N.

4. FEI Number

65-0477236

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

City & State

23 NAPLES, FL

City & State

28 NAPLES, FL

Zip

24 33963

Country

25 USA

Zip

29 33963

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORABITO, ANTHONY
3100 NORTH ROAD
NAPLES FL 33942

81 Name

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

777 109th Ave. N.

83

84 City

NAPLES

FL

85 Zip Code

33963

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 filed applicant)

(Signature typed or printed name of registered agent and filed applicant)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSVT
NAME	MORABITO, ANTHONY
STREET ADDRESS	3100 NORTH ROAD
CITY, ST, ZIP	NAPLES FL 33942
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSVT	☒ Change	☐ Addition
1.2 NAME	MORABITO, ANTHONY		
1.3 STREET ADDRESS	777 109th Ave. N.		
1.4 CITY, ST, ZIP	NAPLES, FL 33963		
2.1 TITLE		☐ Change	☐ Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY, ST, ZIP			
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110 (3)(9)(b), Florida Statutes. I further certify that the information included in this annual report contains material 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 of this form, or in an attachment with an address.

SIGNATURE:

Anthony Morabito
ANTHONY MORABITO
NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Month/Year

4-24-95