Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90186 027 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400023725

1. Corporation Name

REMA OF SARASOTA, INC.

Principal Flace	e of Business	Mailing Address			
1741 MAIN ST		1741 MIAN ST			
SUITE 101 SARASOTA FL 34236 US		Suite 101 Sarasota fl 34236 US			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 03/29/1994
2. Principal Pl	lace of Business	2a. Mailing Address		,	4. FEI Number Applied For
21		26 1741 M	41N	ST	65-0566007 No. Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional
22		27			Fee Required
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	_ Countr	У	8. This corporation owes the current year Intangible
24	25	29 30	0]		Perso al Property Tax.
	9. Name and Address of Current	Registered Agent		4 1 1	10. Name and Address of New Registered Agent /
MEN	ADLE JOSEDU D		8	1 Name	
	ABLE, JOSEPH P		8:		dress (P.O. Bo ( Number is Not Acceptable)
	B MAIN ST		ļ		41 MAINST
	E 104		8:	.5	UITE 10/
SAH	ASOTA FL 34237		84	4 City	85 Zin Code
,				1 , 21	POPULATION SUBMITS this statement for the purpose of changing its registered
SIGNATURE	Signature, typed or printed nome of registered agen	and title if applicable. (NO E: Re	agistered Ág	ent signature require	red when reinstating DATE
12.	OFFICERS AN		13.		ADDITI ONS/CHANGES TO OFFICERS AND DIRECTO RS IN 12
TITLE	S	☐ DELETE	1.1 TITLE		Change Addition
NAME	venable, Joseph P		1.2 NAME		
STREET ADDRESS	1400 4TH AVE W		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-		15 Channa El Addition
TITLE	DP	☐ DELETE	2.1 TITLE		Change Addition
NAME )	RIVOLTA, PIERO		2.2 NAME	:	
STREET ADDRESS	2033 MAIN STREET #104		2.3 STRE	ET ADDRESS	1741 MAIN ST, SUITELD
CITY-ST-ZIP	SARASOTA FL 34237		2.4 CITY-		34236
TITLE		☐ DELETÉ	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STRE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY-		Change Cl Additio
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAMI		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		——————————————————————————————————————	4.4 CITY-		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRI.SS			ł	ET ADDRESS	
CITY-ST-ZIP		——————————————————————————————————————	54 CITY-		Change TAddition
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STRE	ET ADDRESS	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0; (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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

4/27/99 (941) 954 0355

Daytime Phone #