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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996 DOCUMENT #

P94000027413 (1)

Principal Place of Business Mailing Address  671 \$ U\$1 VERO BEACH FL 32962  ***  ***  ***  ***  ***  ***  ***										
•						3. Date Incorporated or Qualified	3a. Date of		•	
2. Principa! Place of Business		2a. Mailing Address			04/07/1994 4. FEI Number	11	<i> 29 </i>	1995		
21		26			59-3268051		<b></b>	Applied For		
Suite, Apt. #, etc.		Suite, Apt. #, etc.					to 7	Not Applicable  5 Additional		
City & State		27			5. Certificate of Status Desired			Pequired		
23		City & State			6. Election Campaign Financing	<b>j</b> ı	\$5.0	00 May Be		
Zip	Country	Zip Country			Trust Fund Contribution		Add	ed to Fees		
24	25	29	30)			8. This corporation has liability for in Florida Statutes Yes		nder s	s 199.032,	
	9. Name and Address of Currer	nt Registered Agent	100			Florida Statutes Yes  10. Name and Address of New R				
			8	31	Name	To. The Modress of Hear I	obistelen whe	3111		
SARACINO, DOMINIC L				32	Stenet Addin	dress (P.O. Box Number is Not Acceptable)				
	DLONIAL DR		[	"	Street Addre	ss (F.O. Box Number is Not Acceptab	le)			
VERO	BEACH FL 32962			3			<del> ·</del> - ·			
			E	14	City			_7-=		
11. Pursuant to	the provisions of Sections 207 0500	1007 1500 5							ip Code	
Or registere	ed agent, or both, in the State of Florid	and 607.1508, Florida State da. Such change was author	ites, the above ized by the co	enar rpora	med corporal ation's board	ion submits this statement for the purp of directors. I hereby accept the appo	oose of changing	ng its	registered office	
	h, and accept the obligations of, Secti	ion 607.0505, Florida Statute	es.			or octors. Thereby accept the appe	with the as reg	stere	agent. I am	
SIGNATURE	Signature, typed or printed name of registered agent	and title it applicable (N	IOTE: Registered Ag	nool e	auchie en deut					
12.	OFFICERS AND		13.	JOHN 31	3 more reductor t	ADDITIONS/CHANGES TO OFFI	STAG CEOD AND DIG	2501	000 114 40	
TITLE	Р	DELETE		E	·I	ADDITIONAL PROPERTY OF THE PRO			Addition	
NAME	DOMINIC SARACINO		1.2 NAMI	£			C v	idigo		
STREET ADDRESS	625 COLONIAL DR		13 STRE	ET AD	ORESS					
CITY-ST-ZIP TITLE	VERO BEACH FL 32462		1.4 CITY-ST-ZIP							
NAME	\$	DELETE	2 1 7111.6	E			C	nange	Addition	
STREET ADDRESS	JANET SARACINO		2.2 NAME	Ε	1					
CITY-ST-ZIP	625 COLONIAL DR VERO BEACH FL 32462		2.3 STREI	REET ADDRESS						
TITLE	VERO BEACH PL 32462	DELETE	ELETE 24 CITY-S1-ZIP		'IP					
NAME		□ Mill			1		CI	nange	Addition	
STREET ADDRESS			3.2 NAME 3.3 STRE		Durec					
CITY-ST-ZIP			3.3 STRE 3.4 CITY-						,	
TITLE		☐ DELETE	4. 1 TITLE		<u> </u>		[] Cr	2070	C) Addition	
NAME			4.2 NAME				(	.ange	Addition	
STREET ADDRESS			4.3 STREE		DRESS					
CITY-ST-ZIP			4.4 CITY-	S1-21	IP					
TITLE		DELETE	5 1 TITLE				☐ Ch	ange	Addition	
NAME ETPEET ADDRESS			5.2 NAME					-		
STREET ADDRESS			. 5.3 STREE	I ADD	PRESS					
CITY-ST-ZIP TITLE	5.4 01				P					
NAME	DELETE			6 1 TITLE			Ch	ange	Addition	
STREET ADDRESS			62 NAME							
CITY-ST-ZIP			6.3 STHEE							
14 I do hereby	certify that the information supplied w	th this filing is voluntarily furn	6.4 CITY - 9 hisbed and doc		·	he exemption stated in Section 119.07	100.0			
oath; that I a appears in E	ne information indicated on this annua im an officer or director of the corpora Block 12 or Block 13 Lichanged, or or	If report or supplemental ann ation or the receiver or truste an attrichment with an addr	ual report is tri e empowered ess	ue ar	nd accurate a xecute this re	he exemption stated in Section 119.0; and that my signature shall have the sa eport as required by Chapter 607, Flori	าเอ)(ห), Florida S ame legal effect da Statutes; ar	statute : as if id the	es. I further made under it my name	

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR WILL SARACINO 1/19/96 407-770-4249