

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

FILED

**Feb 21 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P94000036860 (2)

1. Corporation Name
LOU PISCITELLI INC.



Principal Place of Business
**1448 CHURCHILL CIRCLE
UNIT 2 #201
NAPLES FL 33999**

Mailing Address
**1448 CHURCHILL CIRCLE
UNIT 2 #201
NAPLES FL 34118-3613**

3. Date Incorporated or Qualified
05/16/1994

3a. Date of Last Report
06/12/1996

2. Principal Place of Business
21 **240 9th ST. S.W.**

2a. Mailing Address
26 **240 9th ST. S.W.**

4. FEI Number
65-0489271

Applied For
 Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State
23 **NAPLES FL**

City & State
28 **NAPLES FL**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip
24 **34117**

Country
25 **USA**

Zip
29 **34117**

Country
30 **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**PISCITELLI, LOUIS
1448 CHURCHILL CIRCLE
UNIT 2 #201
NAPLES FL 33999**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PVST	<input type="checkbox"/> DELETE
NAME	PISCITELLI, LOUIS	
STREET ADDRESS	1448 CHURCHILL CIRCLE	
CITY-ST-ZIP	NAPLES FL 33999	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PISCITELLI, LOUIS	Address
1.3 STREET ADDRESS	240 9th ST. S.W.	
1.4 CITY-ST-ZIP	NAPLES, FL 34117	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: **Louis Piscitelli** **LOUIS PISCITELLI** 941 352-6777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)