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Apr 14 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 # P94000043592 (2)

1. Corporation Name

SARASOTA KAREZZI, INC.



Principal Place of Business

Mailing Address

3740 BEE RIDGE RD
SARASOTA FL 34239
US

19060 SOUTH TAMiami TRAIL
FORT MYERS FL 33908-4704

2. Principal Place of Business

21 3740 Bee Ridge Rd

2a. Mailing Address

26 Same

22 Sarasota Fla

27 Sarasota Fla

23 34233

28 34233

24 Zip Country
25 US

29 Zip Country
30 US

3. Date Incorporated or Qualified
06/10/1994

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0501345

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

9. Name and Address of Current Registered Agent

JOSEPH R LOCKER, JR.
350 5TH AVE SOUTH
SUITE 200
NAPLES FL 33940

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PSTD
STREET ADDRESS KARAKOSTA, CHRIST J.
CITY-ST-ZIP 19060 S TAMiami TRAIL
FT MYERS FL

TITLE ☒ DELETE
NAME VPD
STREET ADDRESS TEREZI, ROMEO
CITY-ST-ZIP 19060 S TAMiami TRAIL
FT MYERS FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS VANAS, JAMES
CITY-ST-ZIP 19060 S TAMiami TRAIL
FT MYERS FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME VPD
2.3 STREET ADDRESS mitat Salievski
2.4 CITY-ST-ZIP 19060 S Tamiami Trail
Ft Myers FL 33908

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 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

CR2E034 (9/96)