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

PROFIT CORPÓRATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 23 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000050072 (5)

NAPLES PLASTERING AND DRYWALL, INC.

j						
Principal Place of Business		Mailing Address	Mailing Address		E TEDIADOLARI TONI OIDIN OONI OONI OONA OON	l fight botte diffigh foolg high alid.
6251 WHITAKER ROAD		6251 WHITAKER ROAD	6251 WHITAKER ROAD			
NAPLES FL 34112		NAPLES FL 34112	NAPLES FL 34112		DO NOT WRITE IN TH	HIS SPACE
					3. Date Incorporated or Qualified	
	_				07/01/1994	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
		26	1 1,		65-0505813	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
<del></del>		28			Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	—		8. This corporation owes or has paid the	current year Intangible Yes No
24	25 9. Name and Address of Curr		29 30 30 agistered Agent		Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent	
CA	NTONASTASO, MARLENE	- Inglistation Algorit		81 Name	10.	30.130.1
6251 WHITAKER ROAD			-	82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
NAPLES FL 34112			ł	DZ SII GOL AU	idress (F.O. Box Nottiber is Not Acceptable)	
TWW Days I to City to				83		
			ŀ	84 City	······································	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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE				_ · <del></del>		
12.	Signature, typed or printed name of registered	agent and title it applicable. (NC AND DIRECTORS	TE: Registered	Agent signature req	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 10	LE	ADDITIONAL OF TO OFF TOLING	Change Addition
NAME	SANTONASTASO, MARLEN	E	1.2 NA	ME		
STREET ADDRESS	6251 WHITAKER ROAD	_	1.3 ST	REET ADDRESS		[8
CITY-ST-ZIP	NAPLES FL 34112		1.4 CI3	Y-ST-ZIP		
TITLE		DELETE	2.1 TIT	LE		Change Addition
NAME			22 NA	ME .		
STREET ADDRESS			2.3 ST	REET ADDRESS		
CITY-ST-ZIP		T priette		TY-ST-ZIP		
TITLE	:	☐ DELETE	3.1 1(1	- '		L. Change L. Addition
NAME			3.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE	<u></u>	DELETE	4.1 T(T	TY+ST-ZIP		Change Addition
NAME			4.2 N/			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		n 1
TITLE	·- <u>-</u>	☐ DELETE	5.1 TIT			Change Addition
NAME			5.2 NA	ME	$\mathcal{M}_{\perp}$	3/2-
STREET ADDRESS			5.3 STF	REET ADDRESS		15/22

14. Thereby 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 ceth; 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.

6.3 STREET ADDRESS

6.1 TITLE

-03/24/98--01020--031 \*\*\*150.00

DELETE