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

PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

· 1996 P94000056344 (2) **DOCUMENT #** 

KREALEX OFIXANDO ZINCX G.C.O.C. INTERNATIONAL, INC. Principal Place of Business Mailing Address 7315 HUDSON AVE HUDSON FL 34667 7315 HUDSON AVE HUDSON FL 34667



						3. Date Incorporated or Qualified 07/29/1994	<b>3a</b> , D	ate of Last F 05/01/19	leport <b>395</b>
2. Principal Plac	e of Business	2a. Mailing Address	S			4. FEI Number	-327	1715	Applied For
		[26]				AFFEILD TOIL		69.7	Not Applicable  5 Additional
Suite, Apt. #, etc.		<u></u> 1	Suite, Apt. #, etc.			5. Certificate of Status Desired			Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Co	ountry		8. This corporation has liability for	intangible	tax under:	199.032,
ָן <sup></sup> י	25	29	30				s 🗌 No		
4	g. Name and Address of Curr	ent Registered Agent				10. Name and Address of New	Registere	ed Agent	
				81	Name				
	I, JULIUS J		82 Stree		Street Addr	et Address (P.O. Box Number is Not Acceptable)			
	ESTNUT ST				02				
ULEAKW	ATER FL 34616			63					
				84	City		F	85	<sup>2</sup> ip Code
SIGNATURES	Signature, typest or printed rating of registerers as	Pitaramireappliana	taire Registra		r sign di wa wa pisa	ADDITIONS/CHANGES TO OF	FICERS A		ORS IN 12
IILE	PS OF TOTAL	DELFT			1	ADDITION OF TAXABLE TO S		Change	
				1 11 11 7					
	RONATI, ALFRED O			1 TITLE NAME	ļ				
•	Bonati, Alfred O 7315 Hudson Avenue		1 2	NAME	ADDRESS				
TREET ADORESS	Bonati, Alfred O 7315 Hudson Avenue Hudson Fl 34667	<u></u>	12 13	NAME STHEET	ADDRESS ST-ZIP				
TREET ADORESS	7315 HUDSON AVENUE	DELET	12 13 14	NAME	- 1			Chang	: Addition
TREET ADORESS ITY+S1-ZIP ITLE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA	[] DELET	12 13 14 E 21	NAME I STHEET I CHT+-S	- 1				Addition
TREET ADDRESS ITY - S1 - ZIP -1LE AME	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET	12 13 14 E 21 27	NAME I STHEET I CHIV-S I TITLE I NAME	- 1				: Addition
TREET ADDRESS ITY - ST - ZIP TILE AME FREET ADDRESS	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA	DELET S 4652	12 13 14 £ 21 27 23 24	NAME I STHEET I CHIY - S I TITLE P NAME IS STREET	ST-ZIP  I ADDRESS ST. ZIF			☐ Change	
TREET ADDRESS ITY - ST - ZIP TLE AME TREET ADDRESS ITY - ST - ZIP	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET	12 13 14 E 21 22 23 24	NAME I STHEET I GETY - S I TITLE P NAME II STREET I TITLE II TITLE II TITLE	ST-ZIP  I ADDRESS ST. ZIF				
TREET ADDRESS ITY S1 - ZIP TLE AME TREET ADDRESS ITY - S1 - ZIP TLE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET S 4652	12 13 14 E 21 22 23 24 E 31	NAME I STHEET I GETY - S 1 TITLE P NAME IS STREET I CITY S 1 TITLE I NAME	ST-ZIP  I ADDRESS 51 ZIF			☐ Change	
REFT ADDRESS TY-S1-ZIP TLE AME TREET ADDRESS TY-S1-ZIP TLE AME	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET S 4652	12 13 14 É 21 22 23 24 1E 31	NAME STREET CHY-S THEE NAME STREET CHY STREET THEE NAME THEE NAME	ST-ZIP  I ADDRESS  ST-ZIP  I ACORESS			☐ Change	
TREET ADDRESS ITY - ST - ZIP T LE AMME TREET ADDRESS ITY - ST - ZIP UILE AAME TREET ADDRESS ITY - ST - ZIP	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	□ DELET  1652 □ DELET	12 13 14 E 21 22 23 24 E 31 32 33 34	NAME I STHEET I CHTY - S I TITLE I NAME II STREET I TITLE I NAME II TITLE I NAME II TITLE II NAME II NAME II NAME II NAME II NAME	ST-ZIP  I ADDRESS  ST-ZIP  I ACORESS			Chang	e 🔲 Addition
TREET ADDRESS ITY - ST - ZIP TLE AAME TREET ADDRESS ITY - ST - ZIP TLE AAMÉ TREET ADDRESS AAMÉ TREET ADDRESS ATY - ST - ZIP TLE TREET ADDRESS ATY - ST - ZIP TILE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET S 4652	12 13 14 E 21 22 23 24 1E 31 32 33 34	NAME I STHEET I CHT - S I TITLE NAME I STREET I TITLE NAME I TITLE NAME I TITLE NAME I TITLE I TITLE	ST-ZIP  I ADDRESS  ST-ZIP  I ACORESS			☐ Change	e 🔲 Addition
TREET ADDRESS ITY-S1-ZIP STLE IAME STREET ADDRESS ITY-S1-ZIP ITLE IAME STREET ADDRESS ITY-S1-ZIP ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	□ DELET  1652 □ DELET	12 13 14 E 21 22 23 24 16 32 33 34 16 4	NAME I STHEET I GETY - S I TITLE P NAME I STREET I CITY S I TITLE NAME I TITLE I NAME I TITLE I TITLE I TITLE	I ADDRESS ST 7P T ACORESS ST 2IF			Chang	e 🔲 Addition
TREET ADDRESS ITY - ST - ZIP TILE AAME TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS TILE TREET ADDRESS TILE TREET ADDRESS TILE TREET ADDRESS	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	□ DELET  1652 □ DELET	12 13 14 E 21 22 23 24 31 32 33 34 TE 4	NAME I STHEET I CHIM S I TITLE I NAME I STREET I TITLE I NAME I TITLE I TITLE I TITLE I TITLE I NAME I TITLE I NAME I TITLE I NAME I TITLE	I ADDRESS I ACORESS SI-ZIP I ACORESS SI-ZIP			Chang	e 🔲 Addition
TREET ADDRESS ITY - ST- ZIP TLE AAME TREET ADDRESS ITY - ST- ZIP TILE AAMÉ TREET ADDRESS ITY - ST- ZIP ITLE ITREET ADDRESS ITY - ST- ZIP ITLE ITREET ADDRESS ITY - ST- ZIP	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	□ DELET  1652 □ DELET	12 13 14 E 21 22 23 24 31 32 33 34 TE 4	NAME I STHEET I GETY - S I TITLE P NAME I STREET I CITY S I TITLE NAME I TITLE I NAME I TITLE I TITLE I TITLE	I ADDRESS I ACORESS SI-ZIP I ACORESS SI-ZIP			Chang	e Addition
TREET ADDRESS ITY - ST - ZIP TILE AAME TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS ITY - ST - ZIP TILE TREET ADDRESS TITY - ST - ZIP TILE TREET ADDRESS TITY - ST - ZIP TILE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET   DELET	12 13 14 E 21 22 23 24 16 31 32 33 34 42 43	NAME O STREET OF THE	I ADDRESS I ACORESS SI-ZIP I ACORESS SI-ZIP			Chang	e Addition
TREET ADDRESS DITY-S1-ZIP STREET ADDRESS DITY-S1-ZIP ULLE NAME NAME	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET   DELET	12 13 14 E 21 22 23 24 E 31 32 33 34 E 4 42 43 44 HF 5 5 5 5	NAME OSTHEET OFFICE STREET OFFICE STREET OFFICE OSTHEET OSTHEE	I ADDRESS I ACORESS SI-ZIP I ACORESS SI-ZIP			Chang	e Addition
TREET ADDRESS DITY-ST-ZIP STREET ADDRESS DITY-ST-ZIP DITLE VAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET   DELET	12 13 14 15 12 13 14 15 14 15 15 16 15 16 16 16 16 16 16 16 16 16 16 16 16 16	NAME OSTHEET OFFICE STREET OFFICE STREET OFFICE OSTHEET OSTHEE	I ADDRESS SI-ZIF  I ADDRESS SI-ZIF I ADDRESS SI-ZIP			Chang	e Addition
STREET ADDRESS CITY-S1-ZIP  ITTLE  NAME  STREET ADDRESS CITY-S1-ZIP	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE	DELET   DELET	12 13 14 E 21 22 23 24 IE 31 32 33 34 IE 4 42 43 44 IF 5 52 53	NAME O STREET OF THE STREET OF	I ADDRESS SI-ZIF  I ADDRESS SI-ZIF I ADDRESS SI-ZIP			Chang	e Addition
NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE		12 13 14 15 22 23 24 16 31 32 33 34 16 52 52 16 52 16 6	NAME O STREET OF THILE OF NAME OF STREET	I ADDRESS SI-ZIP  I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	9000018	1731	Chang	e Addition
STREET ADDRESS CITY - ST- ZIP  TITLE  NAME  STREET ADDRESS CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS CITY - ST - ZIP  TITLE  NAMF  STREET ADDRESS CITY - ST - ZIP  TITLE  NAMF  STREET ADDRESS CITY - ST - ZIP  TITLE  TITLE  NAME  STREET ADDRESS CITY - ST - ZIP  TITLE	7315 HUDSON AVENUE HUDSON FL 34667 T O'RYAN, CECELIA 5050 WESTSHORE DRIVE		12 13 14 15 12 13 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	NAME OF STREET O	I ADDRESS SI-ZIP  I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	9000018 -06/24/960 ***200.00	17'31 1054-	Chang	e Addition

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.0/(s), it has certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made unique and that I am an officer or director of this opporation or the receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if progress or on an attachment with an address

SIGNATURE:

NTED NAME OF SIGNING OFFICER OR DIRECTOR

800-330-4262

Doytine Private #