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FILED
Jun 19 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 # P94000074935 (5)

1. Corporation Name
CONSTAS ENTERPRISES, INC.



Principal Place of Business
533 NORTHLAKE BLVD.
#4
N PALM BEACH FL 33408

Mailing Address
533 NORTHLAKE BLVD.
#4
N PALM BEACH FL 33408-5420

3. Date Incorporated or Qualified 10/07/1994
3a. Date of Last Report 05/21/1996

2. Principal Place of Business
21 2001 SW 15 AVE

2a. Mailing Address
26 SAME

4. FEI Number 65-0521652
Applied For Not Applicable

Suite, Apt. #, etc.
22 #202F

Suite, Apt. #, etc.
27

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

City & State
23 BOYNTON BEACH, FL

City & State
28

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

Zip
24 33426

Country
25 PALM BEACH

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

9. Name and Address of Current Registered Agent
CONSTAS, SHIRLEY A
533 NORTHLAKE BLVD., #4
N PALM BEACH FL 33408

10. Name and Address of New Registered Agent
81 Name SHIRLEY A. CONSTAS
82 Street Address (P.O. Box Number is Not Acceptable) 2001 SW 15 AVE, #202F
83
84 City BOYNTON BCH FL 85 Zip Code 33426

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 signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	CONSTAS, SHIRLEY A	533 NORTHLAKE BLVD., #4	N PALM BEACH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	1.5 DELETE
P	CONSTAS, SHIRLEY A.	2001 SW 15 AVE #202F	BOYNTON BEACH, FL 33426	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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
12/97 21 334 2020

CR2E034 (9/96)