FILE NOW: FILING FEE AFTER MAY 1 IS \$550 DO

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT (= STAT

Sandra B. Morth m

Secretary of State
DIVISION OF CORPOR FIONS

1997 PN - PO 4000 TO 400

DOCUMENT # P9400076167 (3)

DARRELL RIZZUTO CONSTRUCTION COMPANY, INC.

FILED
May 09 1997 8:00am
Secretary of State



Principal Prace	e of Business	Mailing Address			I DOM NAME ON 1111 MAN 1884 1884
8414 ELIZABETH AVENUE 8414 ELIZABETH AVENUE					:
PANAMA CITY	PEACH FL 32408	PANAMA CITY BEACH FL 32	408-465		
				3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal P	Place of Business	2a. Mailing Address	······································	01/01/1995 4. FEI Number	05/01/1996 Applied For
21 10	ince of positions	26		59-3227433	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
City & Stat	he	City & State		6. Election Campaign Financing	\$5.00 May Be
Z ip	Country		iry	Trust Fund Contribution	Added to Fees
4]	25	29 30		8. This corporation has liability for i	ntangible tax under s. 199.032, Yes Tho
*1	9. Name and Address of Curre		·	10. Name and Address of New Re	
RI7	ZUTO, CHARLA C		31 Name		
	14 ELIZABETH AVENUE		32 Street Add	fress (P.O. Box Number is Not Acceptab	le)
	NAMA CITY BEACH FL 32408			and decrease of the contract o	707
•••			93		
			84 City		85 Zip Code
	to the provisions of Sections 607.05 registered agent, or both, in the Statern familiar with, and accept the obli			poration submits this statement for the pation's board of directors. I hereby accept	<u> </u>
SIGNATURE	Signature, typed or printed name of registered a OF FICERS AI	grint and tide if applicable INOTE: F ND DIRECTORS	Registe Agent signature requ	irad when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
Title	P	☐ DELETE	11 LE		Change Addition
NAM!	RIZZUTO, DARRELL		1.2 ME		
STREET ADDRESS	8414 ELIZABETH AVE.		1.3 HEET ADDRESS		
CDY-S1-ZIP	PANAMA CITY FL 32408	LIBUITE	1,4 Y-ST-ZIP		Change Addition
111.6	VPST	OELETE	2.1 (LE		LT criange LT Applitor
NAME STREET ADDRESS	RIZZUTO, CHARLA C 8414 ELIZABETH AVE.		2.2 AME 2.3 REET ADDRESS		
CITY ST-ZIP	PANAMA CITY FL 32408		2 43 ITY-ST-ZIP		•
TITLE	TANGER OF THE SERVE	DELETE	3.1 TLF		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST ZIP			3.4. CITY-ST-ZIP		
TRUE	i	☐ DETELE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
	T. Control of the Con				
		DELETE	4.4 CITY - ST - ZIP	*	Change Addition
MEF		☐ DELETE	4.4 CHY - ST - ZIP 5 1 TITLE		Change Addition
TITLE NAME		☐ DELETE	4.4 CMY-ST-ZIP 51 TITLE 52 NAME		Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	t	Change Addition
CITY \$1-70P TITLE NAME STREET ADORESS CITY-\$1-70P TITLE		☐ DELETE	4.4 CMY-ST-ZIP 51 TITLE 52 NAME		
THEF NAME STREET ADDRESS CHY-ST-ZIE			4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		
TITLE NAME STREET ADORESS CHY-ST-ZIE TITLE			4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE		

4. 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 inclicated 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 13 if chapted, or on an attachment with an address.

SIGNATURE

TUBE AND TYPEO OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Kizzuto 4-29-97 901234116