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

Mailing Address 2114 N.E. 21ST ST.

2a. Mailing Address

26

appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

FT. LAUDERDALE FL 33305-2523

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

2114 N.E. 21ST ST. FT. LAUDERDALE FL 33305



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 24 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

Not Applicable

01/24/1996

3. Date Incorporated or Qualified

12/08/1994

65-0539729

4. FEI Number

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000089432 (6)

DITOCCO DEVELOPMENT, INC.

Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zip Zip Country This corporation has liability for intangible tax under s. 199.032, ☐ Yes 🛕 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DITOCCO, ANTHONY III 2114 N.E. 21ST ST. Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33305 83 84 City 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, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TILLE 1.1 TITLE DITOCCO, ANTHONY III **22E034** 1.2 NAME NAME 2114 N.E. 21ST ST. 13 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 1.4 City-ST-ZIP CHTY-ST-ZP DELETE Change Addition 21 TITLE THLE DITOCCO, ROBYN 2.2 NAME NAME 2114 N.E. 21ST ST. 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADORESS 34. CITY-ST-ZIP CITY-ST-ZIP Change \_\_\_ Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS DITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAM: 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - \$1 - 70° DELETE Change ☐ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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