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

CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS **FILED**

Apr 28 1997 8:00am

Secretary of State

561)

DOCUMENT # P94000091247 (4)

COLLEONI DI AMERICA CORPORATION

Principal Place of Business 711 INDIANTOWN ROAD WEST SUITE A1 JUPITER FL 33458		711 INDIA SUITE A1	Mailing Address 711 INDIANTOWN ROAD WEST SUITE A1 JUPITER FL 33458-7591									
								3. Date Incorporated or Qualifi 11/28/1994		Date of Last R /23/1996	eporl	
· ·	ace of Business	├ ──¬	ng Address					4. FEI Number 65-0541912		<u> </u>	oplied For	
Suite, Apt.	#. etc.	26 Suite.	Suite, Apt. #, etc.								ot Applicable Additional	
22	·	27	27					5. Certificate of Status Desired			equired	
City & State	9		City & State					6. Election Campaign Financin			May Be	
Zip	Country	28] Zip		T Co	untry			Trust Fund Contribution		Added		
24	25	29						Florida Statutes	oration has liability for intangible tax under s. 199.032, atutes			
	9. Name and Address of Curre	nt Registered	Agent	15-1	J.,			10. Name and Address of Nev	/ Registered	l Agent		
	NABITNIG, ERICH	÷			81	Name	e					
	INDIANTOWN RD.					Stree	t Addre	Address (P.O. Box Number is Not Acceptable)				
	re a1 Iter fl 33458					_						
"	IILITTE GOTOG				84	0.4				los l Zin	Code	
						City			FI		Code	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	02 and 607.150 e of Florida, Suc	08, Florida Statu ch change was	ites, the a	above	e-name	d corpo	ration submits this statement for t in's board of directors. I hereby a	he purpose coept the ar	of changing it	ts registered registered	
agent. I a	m familiar with, and accept the oblig	gations of, Secti	ion 607.0505, F	lorida Sta	alutes	١.	,	, , , , , , , , , , , , , , , , , , ,		,	5	
SIGNATURE	Signature, typed or printed name of registered as	oent and title if applica	able INC	TE Register	ed Age	nt signatu	re require	d when reinstating)	DATE			
12.	OFFICERS AN	ND DIRECTORS		13.				ADDITIONS/CHANGES TO O		D DIRECTOR	3S IN 12	
TITLE	PTD DELETE			1.1 7	1,1 TITLE			TD		☐ Change	Addition	
NAME	VOLBEL, PETER							OLBEL, PETER				
STREET ADDRESS	3793 CAPE POINTE CIR. JUPITER FL 33477					ADDRESS	3	793 CAPE POINTE	CIR.			
CITY-ST-ZIP	\$		DELETE		011Y - \$1 111LE	1 - ZII'		UPITER FL 33477	······	Change	Addition	
NAME	ZLANABITING, ERICH				NAME		S	ם מולא המשת מולא ו	177	g-		
STREET ADDRESS	711 INDIANTOWN RD. STE. A	VI		2.3 3	STREET	ADDRESS	7	LANABITNIG,ERIC 11 W. INDIANTOW	תם זאו. ח	CIDE V	2	
CITY-ST-ZIP	JUPITER FL 33477			2.4	CHTY-S	51 - Z(P		UPITER FL 33458	M KD,		ა	
TITLE			☐ DELETE	3.1	IIILE			01 11 DK-1 D - 33 43 0	٠.	☐ Change	Addition	
NAME '					MAME							
STREET ADDRESS						ADDRESS	3					
CITY-ST-ZIP TITLE			DELETE		CITY - S NILE	SI - Z(P				Change	Addition	
NAME				•	NAME							
STREET ADDRESS				4.3 :	STREET	ADDRESS	3					
CITY-ST-ZIP				441	CITY-S	1 - ZiP						
TITLE			DELETE	51	TITLE					Change	Addition	
NAME				521	NAME							
STREET ADDRESS						ADDRESS	3					
CITY-ST-ZIP			DELETE		CITY-S	1 - ZIP	+			Change	Addition	
TITLE NAME			L.J VILLIE		IIILE Name					L.J Change	L.J Augipon	
STREET ADDRESS						ADDRESS	3					

6.4 CITY - ST - ZIP 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 opporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 chapted, or on an attachment with an address.