

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000094386 (7)

1. Corporation Name

P.J. & J.P. HOLDING COMPANY, INC.



Principal Place of Business

20423 STATE ROAD 7  
SUITE 178  
BOCA RATON FL 33498

Mailing Address

20423 STATE ROAD 7  
SUITE 178  
BOCA RATON FL 33498

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/29/1994

3a. Date of Last Report

09/14/1995

4. FEI Number

65-0571272

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

\* COHEN, FRED ESQ.  
\* 712 U.S. HIGHWAY 1  
NORTH PALM BEACH FL 33408

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, or both, if applicable

(NOTE: Registered Agent Signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P  
STREET ADDRESS FAZZINI, PATRICE  
CITY-STATE-ZIP 20423 STATE RD. # 178  
BOCA RATON FL 33448

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/TREASURER/DIRECTOR ☒ Change ☐ Addition

1.2 NAME PATRICE FAZZINI  
1.3 STREET ADDRESS 20423 STATE RD. #178  
1.4 CITY-STATE-ZIP BOCA RATON FL 33448

2.1 TITLE V. PRESIDENT/SECRETARY/DIRECTOR ☐ Change ☒ Addition

2.2 NAME JOSEPH LAMPARIELLO  
2.3 STREET ADDRESS 155 FRANKLIN AVENUE  
2.4 CITY-STATE-ZIP NUTLEY, NJ 07110

3.1 TITLE DIRECTOR ☐ Change ☒ Addition

3.2 NAME LARRY A. LAMPARIELLO  
3.3 STREET ADDRESS 1561 SO. CONGRESS AVE UNIT #175  
3.4 CITY-STATE-ZIP DELRAY BEACH, FL 33445

4.1 TITLE DIRECTOR ☐ Change ☒ Addition

4.2 NAME GERALD P. FAZZINI  
4.3 STREET ADDRESS 1561 SO. CONGRESS AVE UNIT #174  
4.4 CITY-STATE-ZIP DELRAY BEACH, FL 33445

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS 500001797345  
5.4 CITY-STATE-ZIP -04/29/96--01018--015  
\*\*\*200.00

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(j), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY A. LAMPARIELLO, DIRECTOR

1-23-96

(407)  
495-4051

Da-Tim Phone #

CR2E034 (12/95)