

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000001186 (2)**

1. Corporation Name  
**FABIAN BERTUNA, INC.**

*As of June 1st 1996*



Principal Place of Business Mailing Address  
**3001 48TH TERR SW 4484 ARNOLD AVE 3001 48TH TERR SW 2161 17TH ST SW**  
**NAPLES FL 33999 33942 NAPLES FL 33964**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/03/1995</b>	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0545861</b>	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>BERTUNA, FABIAN</b> <b>3001 48TH TERR SW</b> <b>NAPLES FL 33999</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	<b>D</b>	<input type="checkbox"/> DELETE		1 1 TITLE	<b>BERTUNA, FABIAN</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BERTUNA, FABIAN</b>			1 2 NAME	<b>2161 17TH ST. SW.</b>		
STREET ADDRESS	<b>3001 48TH TERR SW</b>			1 3 STREET ADDRESS	<b>Naples, FL 33964</b>		
CITY-ST-ZIP	<b>NAPLES FL 33999</b>			1 4 CITY-ST-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)(k), 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 as an attachment with an address.

SIGNATURE: *[Signature]* \_\_\_\_\_ DATE: **4-12-96** \_\_\_\_\_

CR2E034 (12/95)