

FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 24 1998 8:00am
Secretary of State

DOCUMENT # P95000001418 (9)

1. Corporation Name

PERSICO & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

5120 NE 31 Avenue
Lighthouse Point, FL
33064

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Lighthouse Point, FL
33064

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

3 City & State

27 City & State

4 Zip Country

28 Zip Country

25

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/04/1995

3a. Date of Last Report

4. FEE Number

65-0543663

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

MAGNUSON, KRISTINE A
2000 GLADES RD.
SUITE 208
BOCA RATON, FL 33431

81 Name

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

83

84 City

FL

85 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 607.0508, Florida Statutes.

SIGNATURE

ANTHONY J PERSICO PRESIDENT 2-2-98

Principal Officer or Director (Signature required for all officers and directors)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If any)

14. CHANGE ☐ ADDITION ☐

15. CHANGE ☐ ADDITION ☐

16. CHANGE ☐ ADDITION ☐

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48. CHANGE ☐ ADDITION ☐

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)(A), 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 addendum with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Excluded From

CR2E034 (12/95)