

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 07 1997 8:00am
Secretary of State

DOCUMENT # P95000006173 (5)

1. Corporation Name

CHRISTOPHER J. MALVANO, GENERAL CONTRACTOR, INC.

Principal Place of Business

1017 COMSTOCK ST
PT CHARLOTTE FL 33952

Mailing Address

1017 COMSTOCK ST
PT CHARLOTTE FL 33952-1815



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 531 TAMiami TRAIL		26 531 TAMiami TRAIL		01/20/1995		05/01/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 SUITE 1		27 SUITE 1		65-0551343		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 Port Charlotte, FL.		28 Port Charlotte, FL.		<input type="checkbox"/>		<input type="checkbox"/>	
Zip		Zip		6. Election Campaign Financing		5.00 May Be Added to Fees	
24 33953		29 33953		Trust Fund Contribution		<input type="checkbox"/>	
Country		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
25 USA		30 USA					

9. Name and Address of Current Registered Agent

MALVANO, CHRISTOPHER J
1017 COMSTOCK ST
PT CHARLOTTE FL 33952

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

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALVANO, CHRISTOPHER J	1.2 NAME	
STREET ADDRESS	1017 COMSTOCK ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	PT CHARLOTTE FL 33952	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALVANO, CHRISTINE L	2.2 NAME	
STREET ADDRESS	1017 COMSTOCK ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	PT CHARLOTTE FL 33952	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALVANO, JOHN C JR.	3.2 NAME	
STREET ADDRESS	1017 COMSTOCK ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	PT CHARLOTTE FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Craig Malvano
STREET ADDRESS		4.3 STREET ADDRESS	22171 Belinda
CITY - ST - ZIP		4.4 CITY - ST - ZIP	Port Charlotte FL 33952
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Thomas A Smith
STREET ADDRESS		5.3 STREET ADDRESS	306 Klispie Drive
CITY - ST - ZIP		5.4 CITY - ST - ZIP	Punta Gorda FL 33950
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 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 of this report, or on an attachment with an address.

SIGNATURE

[Signature]

Christopher J. Malvano

1/20/97 944-127-8724

CR2E034 (9/96)