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

**PROFIT** CORPORATION ANNUAL REPORT

1996



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

DOCUMENT # 1. Corporation Name

P95000010925 (2)

IANICE CETTA DA

JANIC	E CETTA, P.A.				# 1880/BB1 (18 1800 BB1) BB1) BB1)	
Principal Place	of Business	Mailing Address		<del></del>		801/1 CO/G: 1/ALE ODING #01/0 (1000
4461 N.W. 6TH COURT COCONUT CREEK FL 33066		4461 N.W. 6TH COUR	4461 N.W. 6TH COURT COCONUT CREEK FL 33066			
					3. Date Incorporated or Qualified 3. 02/06/1995	3a. Date of Last Report
2. Principa' Pla	ce of Business	2a. Mailing Address			4. FEI Number	Applied For
26   Suite, Apt. #, etc   Su				· · · · · ·	65-0550377	Not Applicable  \$8.75 Additional
22 27		F-5			Certificate of Status Desired	Fee Required
Orty & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for inta	
24	25 9. Name and Address of Cur	rent Pegistered Agent	30		Florida Statutes Yes [ 10. Name and Address of New Reg	
	5, Name and Adoless of Odi	Tent negistered Agent	81	Name	10. Name and Address of New Reg	istered Agent
CETTA	ROBERT		00	Ctrook Add	trace (D.O. Day Nigobay in Not Assessable)	
4461 N.W. 6TH COURT			82	Street Add	iress (P.O. Box Number is Not Acceptable)	
COCO	NUT CREEK FL 33066		83			
			84	City		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.05 agent, or both, in the State of F	502 and 607.1508, Florida Statute:	s, the above r	named corpo oration's boa	ration submits this statement for the purpos and of directors. I hereby accept the appoint	se of changing its registered office
fam liar witi	i, and accept the obligations of, S	ection 607.0505, Florida Statutes.			To be all octors. Thoroby accept the appoint	arrone do registarea agente rain
SIGNATURE	sign at its - types) on printed halps of registered a	ment and the it specialists. /NOT	F. Banichwart Anae	the installant require	ed when reinstating)	DATE
12.		AND DIRECTORS	13.	a aig into in technic	ADDITIONS/CHANGES TO OFFICE	
TILE	P	☐ DELETE	1 1 TITLE			☐ Change ☐ Addition
NAME:	CETTA, JANICE		1.2 NAME			
STREET ADDRESS	4461 N.W. 6TH COURT		1.3 STREET	ADDRESS		
CITA ST ZIE	COCONUT CREEK FL 33	DELETE	1.4 CHTY - S	IT - ZIP		50 Mars
NAME	CETTA, ROBERT		2 1 TH LE 2.2 NAME			Change Addition
STREET ADDRESS	4461 N.W. 6TH COURT		2.3 STREET	ADDRESS		
City-St Zir	COCONUT CREEK FL 33	3066	2.5 STREET	1		
HILE		☐ DELETE	3 1 TITLE			Change Addition
NaME			3.2 NAME			
STREET ADDRESS			3 3 STREET	ADDRESS		
CHY ST-ZIF		Figure	3.4 CITY - S	T-ZIP		
TITLE NAME		☐ DELETE	4. 1 TITLE 4.2 NAME			☐ Change ☐ Addition
STREET ADDRESS			4.2 NAME 4.3 STREET	ADDRESS		
CHT SI ZIP			4.4 CITY - S			
Mr.f		☐ DELETE	5 1 TITLE			Change Addition
NEME			5.2 NAME			
STREET ADDRESS			53 STREET	ADDRESS		
COLY ST-ZIP		E3 proper	5.4 CITY - S	T-ZIP	** · · · · · · · · · · · · · · · · · ·	
THI, F		☐ DELETE	6 1 TITLE			Change Addition
NAME STREET ADDRESS			6 2 NAME 6 3 STREET	#UUBEGG		
CIFY+S1+ZIP			64 CITY - S			
14. I do hereby	certify that the information supplie	ed with this filing is voluntarily furnis	hed and doe	s not qualify t	for the exemption stated in Section 119.07(	(3)(k), Florida Statutes. I further
oath; that I	am an officer or director of the co	rporation or the receiver or trustee	empowered t	ie and accura to execute th	ate and that my signature shall have the sar is report as required by Chapter 607, Florid	me legal effect as if made under la Statutes; and that my name
appears in	Block 12 or Block 13 if changed, i	or on an attachment with an addre	SS.		٠ . ا	
SIGNAT		NUE ULTA	OR DIRECTOR		3 5 96 (95)	4) 346-2024  Daytime Phone #