PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000017310

Corporation Name

BARTOLI PROPERTIES, INC.

## FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90111 031 \*\*\*150.00



Principal Place	o of Business	Mailing Address		t ifidifatt ing ifter atter anert anert anter anter	
· '		-			
3883 EAGLES P   TITUSVILLE FL		3883 EAGLES PLACE TITUSVILLE FL 32796			
	<b>02.00</b>	111 WW 178-WE 1 TO WE 2 TO		DO NOT WRITE IN THIS	SPACE
				Date Incorporated or Qualifed	
				03/01/1995	
	lace of Business	2a. Mailing Address	$\overline{}$	4. FEI Number	Applied For
	Indian Kiver	AV 26 1002 India	n Kiver /	△√ <u>59-3301735</u>	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	_	City & State	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country	ZID ZID	Country	This corporation owes the current year Interest.	
Zip 24 32.78		29 3スフ&ひ 3	¬ı (~ \	Personal Property Tax.	☐ Yes ☐ No
24 32.78	9. Name and Address of Cu			10. Name and Address of New Registered	Agent
	3. Hanne and Address of Co		81 Name		
ALAMA CUZARETU				ALAIMO ELIZABETH	
1	EAGLES PLACE		ddress (PO. Box Number is Not Acceptable)		
TITU	SVILLE FL 32796		83	12 Treating Tables AV	
					7
1			84 City T	TTUSVILLE FL	85 Zip Code 327 80
11 Purcuant	to the provisions of Sections 607	0502 and 607 1508. Florida Statutes	the above parmed o	ornoration submits this statement for the nurnose of	changing its registered
office or re	edictored agent or both in the St	tate of Florida. Such change was autt	norized by the corpor	ration's board of directors. I hereby accept the appoi	intment as registered
	m ramiling with, and accept the ob	oligations of, Section 607.0505, Florid	a Statutes.	<b>غ</b> ـ	15-99
SIGNATURE	Signature typed or pyrhed name of registered	d ayent and utte if applicable INOTE R	egistered Agent signature sec	purred when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF	
TITLE	D	DELETE	1 i TITLE	D	☐ Change ☐ Addition
NAME	ALAIMO, ELIZABETH		12 NAME	ALAIHO, ELIZABETH 1002 INDIAN RIVER AV	
STREET ADDRESS	3883 EAGLES PLACE		13 STREET ADDRESS	1002 INDIAN RIVER AV	
CITY-ST-ZIP	TITUSVILLE FL 32796		14 CITY-ST-ZIP	TITUSVILLE FL 3278	<u> </u>
TITLE	D	☐ DELETE	2 1 TITLE	D	Change Addition
NAME	BARTOLI, GUILIANO		22 NAME	BARTOLI, GILLIANO 1002 INDIAN RIVER AV	
STREET ADDRESS	3883 EAGLES PLACE		2.3 STREET ADDRESS	1002 INDIAN RIVER AV	-
CITY-ST-ZIP	TITUSVILLE FL 32796	<u>.</u>	2 4 CITY-ST-ZIP	TITUSVILLE FL 327	80
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
111/E		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
0.774.07.715			64 CITY+ST+ZIP		

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-99

4072641066

Daytime Phone #

CR2E034 (11/98)