

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
Mar 20 1997 8:00am
Secretary of State

DOCUMENT # P95000065751 (6)

1. Corporation Name

SPIRITINO IMPORTS, INC.



Principal Place of Business

Mailing Address

20905 LA QUESTA COURT
BOCA RATON FL 33428
5999 N. FEDERAL HWY
BOCA RATON, FL. 33487

20905 LA QUESTA COURT
BOCA RATON FL 33428-1834
5999 N. FEDERAL HWY
BOCA RATON, FL. 33487

2. Principal Place of Business

2a. Mailing Address

21 5999 N. FEDERAL HWY
22 Suite, Apt. #, etc.
23 Rm 20's
24 Boca Raton, FL.
25 City & State
26 Zip
27 33487
28 Country
29 US

26 5999 N. FEDERAL HWY
27 Suite, Apt. #, etc.
28 Rm 20's
29 Boca Raton, FL.
30 City & State
31 Zip
32 33487
33 Country
34 US

3. Date Incorporated or Qualified

08/24/1995

3a. Date of Last Report

01/02/1997

4. FEI Number

65-0596044

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

9. Name and Address of Current Registered Agent

SPIRELLI, THOMAS G
20905 LAQUESTA COURT
BOCA RATON FL 33428

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

(Note: Registered Agent signature required when reinstating)

(Note: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 TITLE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY-ST-ZIP
1.9 TITLE
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1.99 STREET ADDRESS
2.00 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
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1.99 STREET ADDRESS
2.00 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 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/97

561 994-3495

Daytime Phone # 0006347

CR2E034 (9/96)