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

PROFIT



FLORIDA DEPARTMENT OF STATE

ANNUAL F	ANNUAL REPORT Secretary of State 1006 DIVISION OF CORPORATIONS						
199 DOCUMEI	NT # P950	00078659					
1. Corporation Name	ORIS & COMPANY						
DITE NAZII	Onio a Comiraini					I (100) 181 (10) 41(1) 41(1) 41(1) 41(1)	BLAN BOOK BEEN HABEN NAME DINEN BOOK OFFI (BILL
Principal Place of Business Mailing Arldress							
2272 AIRPORT ROA SUITE 203	AD. SOUTH	SUITE 203	2272 AIRPORT ROAD. SOUTH SUITE 203 NAPLES FL 33962				
NAPLES FL 33962		MAPLES PL 333	JZ			3. Date Incorporated or Qualifier 10/10/1995	d 3a. Date of Last Report
3 5	District	2a. Maling Addres				4. FEI Number	Applied For
2. Principal Place of	Business	26 Washing Address				65-06/3694	Not Applicable
Suite, Apt. #, etc.		<u>├</u> ─1	Suite, Apt. #. etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Cit & State		27 City & State				6. Election Campaign Financing	
City & State		28				Trust Fund Contribution	Added to Fees
Zip	Country Zip			Country			or intangible tax under s. 199.032,
24	25	29	30			Florida Statutes 10. Name and Address of New	/es No
9.	Name and Address of Cur	rent Hegistered Agent		81	Name	TO. Name and Address of New	negistered Agent
KAZITORIS, BASIL P				82			
	2272 AIRPORT ROAD, SOUTH SUITE 203				Street At	doress (F.O. Box Namber is Not Accept	eacie;

NAPLES FL 33962				84	Orty		85 Zip Code
							FL 10 12 15 15 15 15 15 15 15 15 15 15 15 15 15
11. Pursuant to the or registered age	provisions of Sections 607.05 ent, or both, in the State of Fl	502 and 607.1508, Florida Iorida, Such change was at	Statutes, the uthorized by	e above-l the corp	named corp loration's b	poration submits this statement for the oard of directors. I hereby accept the a	purpose of changing its registered office appointment as registered agent. I am
ĺ	d accept the obligations of, 5	ection 607.0505, Florida Si	arures.				
	re, typed or penting name of registered a		(NOT: Bo		it signatur - req	paco when renahing	DEFICERS AND DIRECTORS IN 12
12.	OFFICERS .	AND DIRECTORS	<u>.</u>	13.	-	PAESI 4 EXIT	Change Addition
THE		L. treter		1.2 NAME		BASH D KAZIT	TRIE -
NAME STREET ADDRESS					RESPOCAT	BASIL P KAZIT 2272 AIRPORT NAPLES FL	Rd 30. # 203
CITY-S1-7IP				14 CHY-1		NATLES FL	33562
Title		DELET	Ė	2 1 111:6	11.5		Change Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREE	LADORESS		
CHY-ST-ZIP				2.4 CITY - 1	ST ZIF		
7HLE		DELET	E	3 1 T-TLE	1		Change Addition
NAME				3.2 NAME			•
STREFT ADDRESS					TADDRESS		
CHY+SI-ZIP TITLE		DELL.	· · · · · · · · · · · · · · · · · · ·	3.4 CITY - 4.1 THEE	01-415		Change Addition
NAME		,		4.2 NAME			 - -
STREET ADORESS					LADORESS		
CITY - ST - ZIF				440HY-			
TITLE		☐ DELE	'E	5 I TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				53 STREE	1 ADDPESS		
CITY - ST - ZIP		FILE		5.4 CITY	S* · 712		Change Addition
TILE		DELE	Iτ	6 1 THE			Fill quarter Fill wantersu
NAME				62 NAME			
STREET ADDRESS				0.92:400	LADDELSS		

14. Loo 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)(k), 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 direction of 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 12 or Block 12 or no an attachment with an address.

SIGNATURE:

CR2E034 (12/95)