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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P95000087594 (4)

VENETIAN STUCCO, INC.

Principal Place of Business Mailing Address 888 BRICKELL KEY DRIVE #600 888 BRICKELL KEY DRIVE #600 MIAMI FL 33131 MIAMI FL 33131

FILED May 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/15/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0632953 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intengible ΠNo 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RIZZI, CINZIA 888 BRICKELL KEY DRIVE #600 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 83 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10/9/1 13. PD DELETE Change ☐ Addition TITLE 1.1 TITLE rizzi, steano NAME 1.2 NAME 888 BRICKELL KEY DRIVE #600 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 1.4 CITY - ST - ZiP VPD DELETE Change Addition TITLE 2.1 TITLE RIZZI, CINZIA 2.2 NAME 888 BRICKELL KEY DRIVE #600 STREET ADDRESS 2.3 STREET ADDRESS **MI**AMI FL 33131 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP ☐ Addition DELETE TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 THILE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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