## 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

## DOCUMENT # P95000089146 (1)

S.G.I. INDUSTRIES INC.

## **FILED** Apr 25 1997 8:00am Secretary of State

Principal Place of Business  5508 COURTNEY CIRCLE BOYNTON BEACH FL 33437	Mailing Address 5508 COURTNEY CIRCL BOYNTON BEACH FL 3		
			3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996
2. Principal Place of Business	2a. Mailing Address	······································	4. FEI Number Applied For
Suite, Apt. #, etc	26 Suite, Apt. #, etc.		65-0632039   Not Applical   \$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	28 Zip	Country	Trust Fund Contribution Added to Fees  8. This corporation has liability for Intengible tax under s. 199.032.
24 25	29	30	Florida Statutes
	ddress of Current Registered Agent	81 Name	10. Name and Address of New Registered Agent
PALOMBO, PERRY V			
5508 COURTNEY CII BOYNTON BEACH F		82 Street Add	ress (P.O. Box Number is Not Acceptable)
BOTH ON DENOTE:	L 30707	83	
		84 City	85 Zip Code
			FL
<ul> <li>office or registered agent, or</li> </ul>	both, in the State of Florida, Such change was	s authorized by the corpora	poration submits this statement for the purpose of changing its registered from's board of directors. I hereby accept the appointment as registered
1	accept the obligations of, Section 607.0505,	Florida Statutes.	
SIGNATURE Signature typed or printed	I name of registored agent and title if applicable (N	OTE: Registered Agent signature requi	ired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE PD	L DELETE	1.1 TITLE	☐ Change ☐ Addil
NAME PALOMBO, PE		1.2 NAME	
STREET ADDRESS   5508 COURTN   CITY-ST-ZIP   BOYNTON BEA		1.3 STREET ADDRESS 1.4 City-St-Zip	
TITLE	DELETE	2.1 TITLE	Change Addit
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - 7IP	The printer	2. 4 CiTY-ST-ZiP	
THILE NAME	☐ DELETE	3.1 TITLE 3.2 NAME	Change Addit
STREET ADDRESS		3.3 STREET ADDRESS	
CHTY-ST-ZIP		3.4. CITY-ST-ZIP	
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TITLE		5.2 NAME	Comple Divinit
STREET ADDRESS		5.3 STREET ADDRESS	
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TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addit
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CHTY - ST - ZIF		6.4 CITY - ST - ZIP	

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 eath; 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:**