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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600000404

-GOUNTY-HOME INSPECTIONS, INC.

NC 5/2/97

FOLINO ENTERPRISES, INC

7465 N.W. 4TH STREET

STREET ADDRESS

7465 N.W. 4TH STREET

## Jun 19 1997 8:00am Secretary of State

PLANTATION F	FL 33317	PLANTATION FL 33317-2204			
Î					3. Date Incorporated or Qualified 3a. Date of Last Report 01/03/1996
2. Principal P	Place of Business	26 /220 SW 4	M	A . O	4. FEI Number W-LI/II Q II Applied For
	SW 4th Court			COUR	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & Stat	0, 11,	City & State		,	E Florithe Compains Financing
23 Fort	Landerdale PL	28 Fort Landa			Trust Fund Contribution Added to Fees
Zip 2-3-3	Country	Zip 202 /2 -	Cour	atry	8. This corporation has liability for intangible tax under s. 199.032,
1 200	9. Name and Address of Current	Pagistered Agent	0]		Florida Statutes Yes No  10. Name and Address of New Registered Agent
FOLINO, PETER 81 Name					10. Habito dila Addieda or iron ridgiateroa Again
1220 S.W. 4TH COURT				B2 Street	Address (DO Down Newston in Not Associately)
FT. LAUDERDALE FL 33317				5treer	Address (P.O. Box Number is Not Acceptable)
			Ī	83	
				B4 City	85 Zip Code
11 Purcuant	to the provisions of Sections 607 0500	and 607 1509 Florida Statutos	tho ah	ove pamod	corporation submits this statement for the purpose of changing its registered
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 ager	it and little If applicable (NOTE : F	⊰egis:cred	Agent signature	required when reinstate g) DATE
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THTLE	D FÓLINO, PETER	☐ DELETE	1.1 TH		D, P Grange Addition
NAME OTDEST LOCATES	7465 N.W. 4TH STREET		1.2 NAM		Péter Folino
STREET ADDRESS CITY-ST-ZIP	PLANTATION FL 33317			EET ADDRESS Y~\$1 · ZIP	Ft. Landerdale, 353/2
TITLE		DELETE	2.1 TITL		Change Addition
. NAME			2.2 NA		
STREET ADDRESS			2.3 STR	REFT ADDRESS	
CITY-ST-ZIP			2 4 CII	Y-ST-ZIP	
TITLE		☐ DELE1E	3 1 111	.E	Change Addition
NAME			3.2 NA		
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NAME		LJ DELCIE	4.1 TITL 4. 2 NA		Change Li Addition
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STREET ADDRESS			5.3 \$1R	EET ADDRESS	
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP	700
TITLE		☐ DELETE	6.1 TITL	.F ¦	☐ Change ☐ Addition
NAME .			6.2 NAN	ME.	600002218576 -06/20/9701061012
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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 there is signature shall have the same logal 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 50%. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

\*\*\*165.00