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FILED

Mar 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000000966 (7)

1. Corporation Name

BERGOLLA SERVICES, CO.



Principal Place of Business

12355 S.W. 48TH STREET  
MIAMI FL 33175

Mailing Address

12355 S.W. 48TH STREET  
MIAMI FL 33175-4729

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BERGOLLA, RODOLFO  
12355 S.W. 48TH STREET  
MIAMI FL 33175

3. Date Incorporated or Qualified  
01/04/1996

3a. Date of Last Report

4. FEI Number

65-0643917

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

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

(Signature of the current registered agent and the applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

11. TITLE

PD  
BERGOLLA, RODOLFO  
12355 S.W. 48TH STREET  
MIAMI FL 33175

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

11. TITLE

STD  
BERGOLLA, MARIA  
12355 S.W. 48TH STREET  
MIAMI FL 33175

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

NAME

STREET ADDRESS

CITY-STATE-ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-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:

*Rodolfo Bergolla* RODOLFO BERGOLLA

3-12-97

Date

Daytime Phone #

0238137

CR2E034 (9/96)