

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

FILED
Oct 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P 960000 4340**

1. Corporation Name

ENZA, INC.

Principal Place of Business

Mailing Address

**3000 N.E. 39TH ST
ST. LAUD FL 33308**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7-15-98 (7-15-97)

4. FEI Number

65-0786125

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 owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☐ No

10. Name and Address of New Registered Agent

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

**DONATO DINATALE (CHAIRMAN)
3000 N.E. 39TH ST.
ST. LAUD FL 33308**

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: **Donato Dinatale** PRES.

12. OFFICERS AND DIRECTORS

11. TITLE ☐ DIRECTOR

NAME **DONATO DINATALE**

STREET ADDRESS **3000 N.E. 39TH ST**

CITY, ST, ZIP **ST. LAUD FL 33308**

11. TITLE ☐ DIRECTOR

NAME **ANGELA DINATALE (SECRETARY)**

STREET ADDRESS **3000 N.E. 39TH ST**

CITY, ST, ZIP **ST. LAUD FL 33308**

11. TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

11. TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

14. I hereby certify that the information furnished on this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information is true and correct to the best of my knowledge and belief, and that my signature shall have the same legal effect as if made under oath. If I am a registered agent for the corporation, or the secretary or treasurer, I am aware that this report is required by Chapter 607, Florida Statutes, and that my name appears on the books of the corporation as a registered agent, secretary or treasurer with a residence.

SIGNATURE: **Donato Dinatale**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-11-98

CR2E034 (10/97)