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Apr 09 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 # P96000030528 (9)

1. Corporation Name

TIRAMI SU CORPORATION



Principal Place of Business

3260 W HILLSBOROUGH AVE  
TAMPA FL 33614

Mailing Address

3260 W HILLSBOROUGH AVE  
TAMPA FL 33614-5902

3. Date Incorporated or Qualified

04/01/1986

3a. Date of Last Re

2. Principal Place of Business

21

Suite, Apt #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0666185

A.

Not Appl

5. Certificate of Status Desired



\$8.75 Additor  
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. 199.03,  
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DI GERIANDO, JOSEPH  
3260 W HILLSBOROUGH AVE  
TAMPA FL 33614

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME DI GERIANDO, JOSEPH  
STREET ADDRESS 3260 W HILLSBOROUGH AVE  
CITY-ST-ZIP TAMPA FL 33614

1.1 TITLE P ☐ Change ☐ Addition

1.2 NAME DI GERLANDO, JOSEPH  
1.3 STREET ADDRESS 3260 W. HILLSBOROUGH AVE  
1.4 CITY-ST-ZIP TAMPA, FL 33614

TITLE V ☐ DELETE

NAME DI GERIANDO, CARMEN  
STREET ADDRESS 3260 W HILLSBOROUGH AVE  
CITY-ST-ZIP TAMPA FL 33614

2.1 TITLE ☐ Change ☐ Addition

TITLE ST ☐ DELETE

NAME PEREZ, CARMEN  
STREET ADDRESS 4923 NEW PROVIDENCE  
CITY-ST-ZIP TAMPA FL 33614

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #