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May 07, 1999 8:00 am Secretary of State

05-07-1999 90167 032 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600037757

1. Corporation Name

A & V ROSSI, INC.

Principal Place of Business Mailing Address 6687 42ND TERRACE N 10288 HUNT CLUB IN UNIT C PBG FL 33418 DO NOT WRITE IN THIS SPACE RIVIERA BCH FL 33407 US 3. Date Incorporated or Qualifed 04/30/1996 4. FEI Number Applied For Principal Place of Business 2a. Mailing Address -0668740 -03-0000FFF Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Added to Fees Trust Fund Contribution 23 28 Zip Country This corporation owes the current year Intangible
 Personal Property Tax.
 Yes Country Zip □ No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ROSSI, ANTONIO Street Address (P.O. Box Number is Not Acceptable) 82 10288 HUNT CLUB LN PBG FL 33418 83 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 1.1 TITLE TITLE ROSSI, ANTONIO M 1.2 NAME NAME 6687 42 TERR, UNIT C 1.3 STREET ADDRESS STREET ADDRESS RIVIERA BCH FL 33407 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE TITLE ROSSI, VICTORIA STELLA 2.2 NAME NAME 6687 42ND TERRN UNIT C 2.3 STREET ADDRESS STREET ADDRESS **RIVIERA BCH FL 33407** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIF CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

14. I 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SCANTONIO MERCOCIO STANTONIO M. ROSSI

DELETE

DELETE

4-27-85

(561)-881-381

☐ Change

☐ Change

☐ Addition

Addition

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