

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000059064**

1. Corporation Name

MARVITO ENTERPRISES, INC.

Principal Place of Business

**28720 CREEKWOOD DRIVE
WESLEY CHAPEL FL 33544**

Mailing Address

**28720 CREEKWOOD DRIVE
WESLEY CHAPEL FL 33544**

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90010 043 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/12/1996

4. FEI Number

59-3388739

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 the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **32922 U.S. Hwy 19 N.**

26 - -

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **PALM HARBOR, FL**

City & State

28

Zip

24 **34684**

Country

25 **PINELLAS**

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**DICARLO, MARIE-LOUISE
28728 CREEKWOOD DRIVE
WESLEY CHAPEL FL 33544**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **DICARLO, VITO**
STREET ADDRESS **28720 CREEKWOOD DR**
CITY-ST-ZIP **WESLEY CHAPEL FL 33544**

TITLE **STD** ☐ DELETE

NAME **DICARLO, MARIE L**
STREET ADDRESS **28720 CREEKWOOD DR**
CITY-ST-ZIP **WESLEY CHAPEL FL 33544**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE

MARIE-LOUISE DiCARLO 8/12/99 813-991-7507

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

0084134

PAL 000059064
606 760-90010-43

MARVITO ENTERPRISES, INC.
28720 CREEKWOOD DRIVE
WESLEY CHAPEL, FL 33544-4325
(813) 991-7507

August 12, 1999

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

RE: DOCUMENT # P96000059064
FEI 59-3388739

SUBJECT: 1999 PROFIT CORPORATION ANNUAL REPORT PACKET

Dear Sir/Madam:

Enclosed please find Profit Corporation Annual Report 1999, together with my business check, in the amount of \$150.00, made payable to Department of State. This check represents the annual report fee for 1999.

I do not know why I have not received notification to renew. Neither my Corporate Office, 28720 Creekwood Drive, nor the Principal Place of Business, located at 32922 U.S. Highway 19 North, Palm Harbor, received notification that the annual report was due.

Accordingly, please accept this letter as a request to file now at -- Annual Report \$61.25 + \$88.75 Corporation Supplemental Fee. Should you require any additional information, please advise.

Very truly yours,



MARIE-LOUISE DiCARLO
SECRETARY/TREASURER

Enclosure