

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

FILED

Jan 27 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 # P96000085388 (2)

1. Corporation Name  
ROBERTO PORCIANI, INC.



Principal Place of Business: 290 S COUNTY RD, PALM BEACH FL 33480  
Mailing Address: 290 S COUNTY RD, PALM BEACH FL 33480-4245

3. Date Incorporated or Qualified: 10/14/1996  
3a. Date of Last Report  
4. FEI Number: 65-0625414  
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

2. Principal Place of Business (21-24)  
2a. Mailing Address (25-30)  
22. Suite, Apt. #, etc.  
23. City & State  
24. Zip, Country

9. Name and Address of Current Registered Agent  
MARTIN E. WASHOFSKY, E.A., P.A.  
4360 NORTHLAKE BLVD  
SUITE 205  
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent  
B1 Name: JOSEPH EDWARD FACIOLINE  
B2 Street Address (P.O. Box Number is Not Acceptable): 16416 133RD DRIVE N  
B3  
B4 City: JUPITER FL 85 Zip Code: 33478

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] DATE: 1/10/97

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1-1.4 (TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP) and checkboxes for Change/Addition.

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] DATE: 1/20/97 (561) 833-7718

CR2E034 (9/96)