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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 08 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000098801 (9)

ESSENTIAL USA, INC.

appears in Block 12 or Block 13

SIGNATURE:

Principal Piac	e of Business	Mailing Address	5121 CASTELLO DRIVE			T TORLICEN IND HOUSE ONLY BOTHY ORDIT ROUSE SOUR TORDS FORD LEVIN BOLDS INDIVIDUAL		
5121 CASTELLO	DRIVE							
SUITE 2			SUITE 2					
NAPLES FL 34103		NAPLES FL 34103-1902				3. Date Incorporated or Qualified	3a. Date of Las	st Report
						12/06/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FE Number	<del>-1</del>	Applied For
21		26		_		162-071 <i>3369</i>	<b>.</b>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional
22		27				J. Commodic of Glades Desired	Fee	Required
City & Stat	0	Crty & State				6. Election Campaign Financing		OO May Be
23	Characteristic	Zip	Count			Trust Fund Contribution		ed to Fees
Ζιρ <b>24</b>				Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
241	25   9. Name and Address of Cur		1301	·····	······································	10. Name and Address of New Re		
LALIM	re, John P		8	31 N	lame			
	CASTELLO DRIVE		-		S	(5.0. 5. 1)	1-1	
SUIT			ļ	12 5	itreet Add	iress (P.O. Box Number is Not Acceptab	e)	
	E 2 LES FL 34103		Ē	33				
1001	LEO I E OT IOO		-	34 6	Nit.		log 1.3	ip Code
			ľ	"	Xity		FL 85 2	.ip Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	ites, the abo	ova-n	amed cor	poration submits this statement for the p	urpose of changin	g its registered
office or r	registered agent, or both, in the S im familiar with, and accept the ol	tate of Florida. Such change was bligations of, Section 607.0505, F	i authorized Iorida Statul	by th tes.	e corpora	poration submits this statement for the pation's board of directors. I hereby accept	ot the appointment	as registered
SIGNATURE	·							
Cicirone	Signature, typied or printed name of registers			Agent 8	ignature requ	ired when reinstating)	DATE	
12.		AND DIRECTORS	13.		· · · · · · ·	ADDITIONS/CHANGES TO OFFIC		
TIFLE	D	☐ DELETE	1.1 TITL)		- 1		Chan	ge 🔲 Addilion
NAME	WHITE, JOHN P		1.2 NAM		1			
STREET ADDRESS	5121 CASTELLO DRIVE, SU	ITE 2	1.3 STRE	eet adi	DRESS	•		
CITY - ST - ZIP	NAPLES FL 34103	THE OFFICE	1.4 CITY		IP		I I Oben	no Laddition
TITLE	D	DELETE	2.1 TITE		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		☐ Chan	ge Addition
NAME	WHITE, RANSEY P		2.2 NAM					
STREET ADDRESS	5121 CASTELLO DRIVE, SU	IIE 2	23 STRE		ı ı			
CHY-SI-Z-P	NAPLES FL 34103	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		ZIP		Chan	ge Addition
TITLE		יין ענירוג	3.2 NAME					go ragation
NAME CARCEL ADDRESS				-	nocco	•		
STREET ADORESS			3.3 STRE		1			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITU		ur.		Chan	ge Addition
NAME		L. J VLLETL	4. 2 NAN					
STREET ADDRESS			4.3 STRE		naess			
CITY-ST-ZIP			4.4 CFTY					
TITLE		DELETE	5.1 TiTL				Chan	ge Addition
NAME			5.2 NAM		}			- —
STREET ADDRESS			5.3 STA		DRESS			
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE	6.1 TITL				Chan	ge Addition
NAME			6.2 NAM	AE.	1			
STREET ADDRESS			63 STR		DRESS			
CITY-ST-ZiP			6.4 CITY		ì			
	by certify that the information sup	plied with this filing does not qua				ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify t	hat the
information I am an o	on indicated on this annual report officer or director of the corporatio	or supplemental annual report is n or the receiver or trustee empo	true and ac wered to ex	cura	te and tha this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	ai effect as if made Statutes; and that r	under oath; that ny name