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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mostham =

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099111 (2)

GRECO ENTERPRISES INC.

Principal Place of Business

Mailing Address

54 GOLDEN GATE CIR PT ORANGE FL 32119 54 GOLDEN GATE CIR PT ORANGE FL 32119

FILED Mar 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualified 01/01/1997					
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address				7f		1 14	mollad Car	
21	lace of Bosiliess		 				0721			pplied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.					P '(X)			lot Applicable	
22		27	27				Status Desired			Additional Required	
City & State	6	City & State	City & State				paign Financing	¨	\$5.00	May Be	
23		28	<u> </u>				ontribution		Added	to Fees	
Zip	Country	Zip	Cour	ntry			tion owes or has pa				
24	25 29 30				Personal Property Tax due June 30. Yes						
	g, Name and Address of Cur	10. Name and Address of New Registered Agent									
OCCUPITE OFFICIAL P					81 Name						
54 GOLDEN GATE CIR					82 Street Address (P.O. Box Number is Not Acceptable)						
- PT	ORANGE FL 32119						· · · · · · · · · · · · · · · · · · ·				
•				83							
•			}	64	City			FL	85 Zip	Code	
11 Pursuant	to the provisions of Sections 607.0	0502 and 607.1508. Florida Statu	ites, the ab	L	-named corp	oration submits this	statement for the p	urpose of	changing	its registered	
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.											
agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature typed or printed name of registered	appear and tele if socilinable (NC	NF: Peristered	Anon	ot elonatura racuiro	ed when reinstating)		DATE	- · · · · · · · · · · · · · · · · · · ·		
12.		AND DIRECTORS	13.	rigon	it aignatora regone		HANGES TO OFFIC		DIRECTO	BS IN 12	
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NAME			1.2 NA		"	Collette,	Gregory				
STREET ADDRESS					ADDRESS		Gate Circl	ė			
					1	Pt Orange		·] '	
CITY-ST-Z#P TITLE			1.4 CIT		- ZIF	it orange	11 25113		Change	Addition	
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			3.1 M								
NAME											
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CITY-ST-ZIP			5.4 CIT		- ZIP						
TITLE		☐ DELETE	6.1 TIT	LE					Change	Addition	
NAME			6.2 NA	ME]					1	
STREET ADDRESS			6.3 ST	REET /	ADDRESS					ł	
CITY-ST-ZIP			6.4 CITY-ST-ZIP								
14. I hereby o	certify that the information supplied	d with this filing does not qualify	for the exe	mpt	ion stated in	Section 119.07(3)(i)	, Florida Statutes. I	further ce	rtify that th	e 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.

AND THE PROPERTY OF THE PROPER

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GREENEY N CALLERS 2-17-9

(QN))112 4120

CRZE034 (10/97)