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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 22 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000013299 (7)

PAFFS MANAGEMENT COMPANY, INC.

1/11/0	MAINGEMENT COM NA							
Principal Plac	e of Business	Mailing Address	Mailing Address			- A SAMAIN THE STATES SAME MARIE AND SECOND CONTRACT OF THE SAME SAME SAME SAME SAME SAME SAME SAM	II INDOG IINIÐ HAIÐ	10110 1011 1011
	UCHO CIRCLE	1031 NO. GAUCHO CI	1031 NO. GAUCHO CIRCLE					
DELTONA FL	32725	DELTONA FL 32725				DO NOT MIDITE IN T	HIS SELVEE	
						DO NOT WRITE IN TO  3. Date Incorporated or Qualified	115 SPACE	
9 Principal P	Place of Business	2a, Mailing Address	<del></del>			02/10/1997 4. FEI Number		Applied For
<del></del>	iace of Edamesa	26				59-3428425	<del>  </del>	Not Applicable
Sulte, Apt.	# Atc	Suite, Apt. #. etc.						5 Additional
22	n, 010.	27				5. Certificate of Status Desired	,	Regulred
City & Stat	<u></u>	City & State	· ·			6. Election Campaign Financing		May Be
23	-	28				Trust Fund Contribution		od to Fees
Zip Country		Zip Country			8. This corporation owes or has paid the			
24	25	29	30	,		Personal Property Tax due June 30.	Yes	☐ No
	9. Name and Address of Curr		1001			10. Name and Address of New Registe		
FF	RRENTINO, PETER		1	B1	Name			
	31 NO. GAUCHO CIRCLE		\.		O) A A data	(200 5-11)		
	LTONA FL 32725		<u>'</u>	82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	ETOTAL TE SETES		ļī.	B3				
			<u> </u>					
			[*	84	City	!	FL 85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Stat	lules, the ab	ove-	named corpo	pration submits this statement for the purpo-	se of changing	its registered
l office or a	egistered agent, or both, in the Sta im familiar with, and accept the obt	ate of Florida. Such change wa	s authorized	by t	the corporation	on's board of directors. I hereby accept the	appointment	as registered
l age⊓t.⊺a I	ı <b>m tam</b> ıllar wiln, and accept the opt	ilgations of, Section 607.0505,	Fiorida Statu	лes.				
SIGNATURE	Signature, typed or printed name of registered	new of a part for a financian land.	CAL Dogistoped	Accest	Leverature require	d wher reinstating) DA	76	
12.		AND DIRECTORS	13.	Agena	i signature roddire	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	PD	DELETE	1,1 TITL	.E			☐ Change	
NAME	PERRENTINO, PETER		1.2 NAME				_	
STREET ADDRESS	1031 NO. GAUCHO CIRCLI	F			ADDRESS			
CITY-ST-ZIP	DELTONA FL 32725	<del>.</del>		1.4 CITY-ST-ZIP				
TITLE	VO	DELETE		2.1 DILE			Change	e Addition
NAME	FERRENTINO, FRANK		2.2 NAME		l		. —	
STREET ADDRESS	1031 NO. GAUCHO CIRCLI	F	2.3 STREET ADDRESS		IDDRESS			
	DELTONA FL 32725	-	2. 4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE		STD DELETE		3,1 TITLE			Change	e Addition
NAME	REPRENTINO, ANTOINETTE		3.7 MA		1		- ·····	
STREET ADDRESS	1031 NO. GAUCHO CIRCLI		***		LDDRESS			
	DELTONA FL 32725	-						
CITY-ST-ZIP TITLE	OLDIVINI E OCIEV	DELETE	3 4. CIT		7113		☐ Change	e Addition
NAME			4. 2 NAI	-	Ì			
			1	4,3 STREET ADDR				
STREET ADDRESS			4.3 STR 4.4 CITY		Į.			
CITY-ST-ZIP TITLE		DELETE	5.1 TITL		ZIP		Change	e Addition
NAME	_ <u> </u>		1	5.2 NAME			- Ononge	- La rioditori
			1		ripproe			
STREET ADDRESS					LIDRESS			
CITY-ST-ZIP				5.4 CITY - ST - ZIP 6.1 TITLE			Change	e Addition
TITLE		C) receit	•				CT CHAIGH	y La Muunidii
NAME			6.2 NAN					
STREET ADDRESS			6.3 STR	EET A	ODRESS			
					710 I			

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.