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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90055 037 ***150.00

i. Corporation	MENT # P97000 CALVETTI, INC.	029617			
Principal Place	of Rusiness	Mailing Address		- I (DE) 1083 118 1841 1841 BEIN BENN BENN BENN BENN BENN BENN BENN	(Alib Aire: Bart (Bar saet
•		4657 SAN ANTONIO LN.			
4657 SAN ANTONIO LN. BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134					
				DO NOT WRITE IN THIS SP	ACE
				3. Date Incorporated or Qualifed 04/01/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0747561	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Additional Fee Required
22		27		5.5.0.0.0.1.5	
City & State	e 	City & State		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intang	
24	25	29 3	0	Personal Property Tax. 10. Name and Address of New Registered Age	Yes No
	9. Name and Address of Currer	t Registered Agent	81 Name ->		-
COR	PORATION SERVICE COMPANY		BI	RENNER, HEKHAKI	<u>/</u>
1201 HAYS STREET			82 Street Addr	ess (P.O: Ben Number is Not Acceptable)	1
TALLAHASSEE FL 32301-2525			83	JAN ANTONIO	· · · · · · · · · · · · · · · · · · ·
11400	344.0000 15 0000 1000				
			84 City	ITA SPRINGS FL	Zip Code
44.5		22 and 607 1508 Florida Statutes	the above named com	eration submits this statement for the number of the	anging its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was aut	horized by the corporation	on's board of directors. I hereby accept the appointm	ent as registered
agent. I ar	m familiar with, and accept the obliga	itions of, Section 607.0505, Plond	ia Statutes.	1-6-9	79
SIGNATURE	Signature, typed or pinted name of registered age	nt and title if applicable. (NOTE: R	legistered Agent signature require	d when reinstating) DATE	 }
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS IN 12
TITLE			4477715		
	D	☐ DELETE	1.1 ΠTLE	L,	Change Addition
NAME	D Brenner, Gerhard	☐ DELETE	1.2 NAME	l.	Change Addition
NAME STREET ADDRESS		☐ DELETE		, ,	Change Addition
	BRENNER, GERHARD		1.2 NAME		
STREET ADDRESS	BRENNER, GERHARD 4657 SAN ANTONIO LN.	☐ DELETE	1.2 NAME 1.3 STREET ADDRESS		Change Addition
STREET ADDRESS	BRENNER, GERHARD 4657 SAN ANTONIO LN.		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
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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, with all other like empowered.

SIGNATURE: X