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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

(10/97

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000049543 (6)

CALCATERRA, INC.

STREET ADDRESS

CITY-SI-ZIP

Principal Place of Business Mailing Address 1912-A CALUMET STREET **CLEARWATER FL 34625** CLEARWATER FL 34618-5545 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/02/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaion Financino 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No 24 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CALCATERRA, TERRY 1912-A CALUMET STREET Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34625** 83 84 City 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, typed or printed name of regish red agent and title it applicable. (NOTI: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE CALCATERRA, TERRY NAME 1.2 NAME 1912-A CALUMET STREET STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34625** C/1Y-S1-7/P 1.4 C/TY-ST-ZIP Addition DELETE TITLE 2.1 TITLE Change NAME CALCATERRA, CAROLYN H 2.2 NAME 1912-A CALUMET STREET STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34625** CITY - ST - ZIP 2. 4 CITY - \$T - ZIP DELETE Change ___ Addition TITLE 3.1 TITLE 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7/P DELETE Change Addition 51 THLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP DELFTE Addition Change TITLE 6.1 1(TLE NAME 6.2 NAME

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if or anysed, or on an attact upon with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP