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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700054499 (3)

RAIMONDI & CO., INC.

Principal Place of Business

Mailing Address

## FILED May 01 1998 8:00am Secretary of State



1330 N.E. 147 JENSEN BEAC		1330 N.E. 14TH CT. K-23 JENSEN BEACH FL 34957			DO NOT	WRITE IN THIS S	SPACE	
li.					3. Date Incorporated or Qua 06/19/1997			
2. Principal P	lace of Business  PSW DANFORTH CR	2a. Mailing Address	-45-074	Augala	4. FEI Number 65-076248	,	<u> </u>	plied For
21 <b>2</b> 00 Sulte, Apt.		Suite, Apt #, etc.	7020	C /400-3L	03-07-07		<del></del>	ot Applicable
22		27			5. Certificate of Status Desir	ed 🗆	\$8.75 / Fee Re	
City & State	i City, FL		TY, F	4	6. Election Campaign Finance Trust Fund Contribution	cing	\$5.00 Added t	
Zip 24 349	Country 25	Zip 34990	Country 30		This corporation owes or Personal Property Tax due	e June 30.	Yes 🔀	angible No
	9. Name and Address of Current	Registered Agent			10. Name and Address of N		igent	
RAIMONDI, RAYMOND 81					TERAIMONDI RAYMOND			
1330 N.E. 14TH CT. K-23 JENSEN BEACH FL 34957				81 Name RAIMOND/ RAYMOND 82 Street Address (P.O. Box Number is Not Acceptable) 2008 SW DANFORTH CIRCLE				
			84	City	M City	FL	85 Zip (	Code 4990
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statut Horida, Such change was	tes, the above authorized by	-named corp	poration submits this statement for	r the purpose of	changing its	s registered registered
	m familiar with, and accept the obligation of the company of the c				red when reinstalling)	DAIL	1/23/9	rp
12.	OFFICERS AND		13.	it algorative requir	ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	S IN 12
TITLE	D	X DELETE	1 1 TOTLE				TAUR O	4 4 604
NAME	raimondi, raymond		1.2 NAME	RI	Almond, Rayme 008 SW DANF OLM CITY, P.	IND CONTIN	mali	<b>~</b>
STREET ADDRESS	1330 N.E. 14TH CT. K-23		1.3 STREET	ADDRESS 3	608 EM DANL			
CITY-ST-ZIP	JENSEN BEACH FL 34957		1.4 CITY - S	r-zip 🔑	DLM CITY, PI	2, 44	770	
TITLE		☐ DEFE LE	2.1 TITLE		,		Change	Addition
NAME			2.2 NAME	,				ļ
Street address			2.3 STREET	ADDRESS (				
CITY-ST-ZIP			2. 4 CITY - S	T-ZIP	<u> </u>			
TITLE		∐ DELET <b>e</b>	3.1 1/TLE				L Change	L_ Addition
NAME			3.2 NAME	l				l
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NAME		La otteric	4.7 IIICE				- onange	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 C/TY - ST	1				j
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME				-	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST					
TITLE		DELETE	6.1 TITLE	<u> </u>			Change	Addition
NAME			6.2 NAME	ĺ	•			
STREET ADDRESS			6.3 STREET	address				
CITY-ST-ZIP			6.4 CITY - ST	- ZIP				

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 suppliemental 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 oddress.

OLONIATURE.

- Paragoni

1/12/6

MINIO STATE