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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

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1. Corporation Name

FIANCHETTO CORPORATION

Principal Place of Business

5281 ISLA KEY BLVD #302  
ST PETERSBURG FL 33715

Mailing Address

5281 ISLA KEY BLVD #302  
ST PETERSBURG FL 33715

2. Principal Place of Business

21 3000 66th Street N  
Suite, Apt. #, etc.

2a. Mailing Address

26 3000-66th Street N  
Suite, Apt. #, etc.

22 City & State

23 St Petersburg FL

24 33710 25 Pinellas

27 City & State

28 St Petersburg FL

29 33710 30 Pinellas

9. Name and Address of Current Registered Agent

BEARSON, JOSEPH M  
5281 ISLA KEY BLVD #302  
ST PETERSBURG FL 33715

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME FELD, RICHARD D  
STREET ADDRESS 10605 CARROLLBROOK WAY  
CITY-ST-ZIP TAMPA FL 33618

TITLE VD  
NAME MERRIN-FELD, JANE  
STREET ADDRESS 10605 CARROLLBROOK WAY  
CITY-ST-ZIP TAMPA FL 33618

TITLE SD  
NAME BEARSON, JOSEPH M  
STREET ADDRESS 5281 ISLA KEY BLVD #302  
CITY-ST-ZIP ST PETERSBURG FL 33715

TITLE TD  
NAME POPOVICH, PAULA A  
STREET ADDRESS 7239 4TH AVE S  
CITY-ST-ZIP ST PETERSBURG FL 33707

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD SD  
1.2 NAME Joseph Bearson Joseph M  
1.3 STREET ADDRESS 2414 Lake Point Lane  
1.4 CITY-ST-ZIP Clearwater FL 33762

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/99

727-384-3434

CR2E034 (11/98)