## FILE 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

## DOCUMENT # P97000100530

1. Corporation Name

DEL BIANCO GENERAL CONSTRUCTION, INC.

## FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90080 032 \*\*\*150.00

Principal Place 2226 SE 20TH CAPE CORAL F	PLACE	Mailing Address 2226 SE 20TH PLACE CAPE CORAL FL 33990		DO NOT WRITE IN 3. Date Incorporated or Qualifed 11/19/1997		
2. Principal P	lace of Business	2a. Mailing Address	14.5/	4. FEI Number	Appl	ied For
21	EE_	26 1176 SE	.70 Pl.	65-0797095	Not /	Applicable
	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	、 <b>\$8.75</b> Ad	
22		. 27		J. Contracte of Clarks Decired	Fee Req	
City & Stat	Coral El	City & State  28 CAPE COPA	F1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	
ZIO	Country	Zip 2230VA	Country	8. This corporation owes the current year	ar Intangible	
24	77 U 25 /SA	29 _ E D D 77 U   30	I IFF	Personal Property Tax.		No
	ame and Address of Curre	ent Registered	81 Name	10. Name and Address of New Registe	erea Agent	
CAT	ALANO ANTHONY I		oi Name			
CATALANO, ANTHONY J 4001 TAMIAMI TRAIL NORTH, SUITE 404 NAPLES FL 34103			82 Street Address (P.O. Box Number is Not Acceptable)			
			83			
11/31	220 12 04 100		63			
			84 City		FL 85 Zip Co	ode
l office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Flonda. Such change was autr gations of, Section 607.0505, Florida	nonzed by the corpora a Statutes.	rporation submits this statement for the purpo- tion's board of directors. I hereby accept the a	appointment as regi	egistered stered
	Signature, typed or printed name of registered ag	<u></u>	egistered Agent signature requ	ADDITIONS/CHANGES TO OFFICER		9 IN 12
12.	<del></del>	ND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICER	Change	Addition
TITLE	PT DEL BLANCO, RONALD II	DELLIC	1.2 NAME	Ronald A. Del Bianco II		
NAME		10		ezzese zot Pl.	-200	
STREET ADDRESS		10		CAMO CAMIL FL.	35990	}
CITY-ST-ZIP	NAPLES FL 34108 VPS	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	cape with it	☐ Change	☐ Addition
NAME	DEL BLANCO, ATHENA		2.2 NAME -	···		
STREET ADDRESS		10	2.3 STREET ADDRESS			
i	NAPLES FL 34108	-10	2. 4 CITY-ST-ZIP		•	}
CITY-ST-ZIP TITLE	INTELOTE OFFICE	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME		_	3.2 NAME			Ì
STREET ADDRESS			3.3 STREET ADDRESS			ł
CITY-ST-ZIP	,		3.4. CITY-ST-ZIP	_		
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			j
STREET ADDRESS			4.3 STREET ADDRESS		•	
CITY-ST-ZIP			4.4 CITY+ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	1					U
<u> </u>			5.4 CITY-ST-ZIP		Ch	Addition
TILE		☐ DELETE	6.1 TITLE		Change	Addition,
TITLE NAME		☐ DELETE	6.1 TITLE 6.2 NAME		Change	☐ Addition,
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition.

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 attackment with an address, with all other like empowered.

SIGNATURE:

HOREST CONTRED TO SIGNING OFFICER OR DIRECTOR

4/14/99 941 WIL 10/077

CRZE034 (11/9)