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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P97000107816 (5)

FREDERICO EQUIPMENT & LAND DEVELOPMENT, INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address		. 160MBA. 108 .0011 .0014 .0011 BA111 .00101 15.014 #0511 \$600 ! 103	Et bidim beit toot
231 N.W. 18TH AVE.		231 N.W. 18TH AVE.			
DELRAY BEACH FL 33444		DELRAY BEACH FL 33444		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				12/24/1997	
2. Principal P	lace of Business	2a. Mailing Address		4 FFI Number	Applied For
21		26		65-0801486	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		— \$8.7	75 Additional
22		27		Certificate of Status Desired Fe	e Required
City & State	e e	City & State			.00 May Be
23		28		Trust Fund Contribution	ded to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year	
24	25	29	30	Personal Property Tax due June 30. Yes	∐ No
	9. Name and Address of Curren	ii negisiereo Agent	61 Name	10. Name and Address of New Registered Agent	
nionano s. niucino, r.a.				,	
			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
60	CA RATON FL 33432		83		
}					
			84 City	FL 85	Zıp Code
44 Purcuent	to the provisions of Sections 607 0L0	2 and £07 1£09 Elorida Stati	ulos the above named as	rporation submits this statement for the purpose of changing	an ita raniatarad
I office or re	registered agent, or both, in the State	of Florida, Such change was	authorized by the corpora	ation's board of directors. I hereby accept the appointmen	t as registered
ľ	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutės.		
SIGNATURE	Stgnature, typed or printed name of registered age	ent and later if any decable (NC	DTL. Registered Agent signature requ	uired when reinstatinc) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12
TITLE	DP	DELETE	1.1 TITLE	☐ Char	
NAME	FREDERICO, TOM		1.2 NAME		•
STREET ADDRESS	231 N.W. 18TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33444		. 1.4 CITY - ST - ZIP		
TITLE	DP .	DELETE	2 1 TITLE	☐ Char	nge Addition
NAME	FREDERICO, TOM		2.2 NAME		·
STREET ADDRESS	231 N.W. 18TH AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33444		2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE	☐ Char	nge 🔲 Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY - ST - ZIP			3.4. CITY+ST-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Char	nge 🔲 Addition
NAME			4. 2 NAME		ł
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE	☐ Char	nge 🔲 Addition
NAME		•	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	6.1 TITLE	☐ Char	nge 🔲 Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZIP		

I hereby certify that the information supplied with this fitting that should be exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental employed in the exemption stated 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 of the feety of it rustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed of on an attailment with an addirect

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