

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Aug 16, 1999 8:00 am**  
**Secretary of State**

08-16-1999 90001 038 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



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

**DOCUMENT # P98000030227**

1. Corporation Name

**POVIA BUILDING AND DEVELOPMENT, INC.**

Principal Place of Business  
2328 SW 31ST LN  
CAPE CORAL FL 33914

Mailing Address  
2328 SW 31ST LN  
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/30/1998**

4. FEI Number

**65-0823618**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**POVIA, MICHAEL ROBERT JR.  
2328 SW 31ST LN  
CAPE CORAL FL 33914**

10. Name and Address of New Registered Agent

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

*Michael R Povia Jr.*  
Signature, typed or printed name of registered agent and title if applicable.

*Michael R Povia Jr.*  
(NOTE: Registered Agent signature required when reinstating)

DATE

**8-1-99**

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **POVIA, MICHAEL ROBERT JR.**  
STREET ADDRESS **2328 SW 31ST LN**  
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

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

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

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

6.1 TITLE ☐ Change ☐ Addition  
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.

SIGNATURE:

*Michael R Povia Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

**8-1-99**

DAYTIME PHONE #

**(941) 540-3522**

CR2E034 (5/99)

0087477

P9 8000030227  
605855-90001-38

Povia Building and Development, Inc.

2328 SW 31<sup>st</sup> Lane

Cape Coral, FL 33914

Tel./Fax: (941) 540-3522

Reg.: 1999 Profit Corporation Annual Report

P98000030227

Request to waive the additional \$ 400 filing fee.

To the  
Secretary of State

To whom it may concern,

Beginning of the year I didn't receive an Annual Report Package.

Therefore I copied in April all my files of the Incorporation and send them to your office. A few weeks later the copies were returned to me with a note on it to maintain the copies for my records. No signature – no date – no name – no other instructions.


I assumed that this would take care of the Annual Report.

Then I received the 2<sup>nd</sup> Notice to file the Annual Report. After a conversation with one of your co-worker and explaining what happened, she told me to request a waiver of the additional \$ 400 and send only the regular filing fee of \$ 150.

Herewith I return the Annual Report with payment of the filing fee in the amount of \$ 150.

If you have any questions, please contact me at my office ( 941-540-3522).

Regards,

  
Michael Povia Jr.