PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000084916

CERTIFIED INSPECTION SERVICE OF SOUTHWEST FLORID A, INC.

Principal	Pface	of	Business						
	•								
1279 VENETIAN WAY									

Mailing Address

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90259 007 ***150.00



	278 VENETIAN WAY APLES FL 34110 1278 VENETIAN WAY NAPLES FL 34110			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified					
						10/02/1998			
2. Principal Pl	ace of Business	2a. Mai	ling Address	 		4 EEI Number	Ar	plied For	
21		} <u>-</u>	J			165-086715 T	No	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired				
					6 Floation Compaign Financing	\$5.00	May Po		
23	3 28				Trust Fund Contribution Added to Fees				
Zip	Country 25	— `	_	, '	•	 This corporation owes the current year I Personal Property Tax. 	ntangible ☐ Yes	□No	
24						10. Name and Address of New Registere	d Agent		
		NAPLES FL 34110 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 10/02/1998 4. FEI Number							
PITKI	n, Jerald R					(D.O. D. N. Los is Alab Assessable)			
4947	TAMIAMI TRAIL N			82	Street Add	Iress (P.O. Box Number is Not Acceptable)			
	E 202			83					
	ES FL 34103								
				84	City	F	L 85 Zip	Code	
office or re agent. I ar	enistered agent or both in the Sta	te of Flonda. S	uch change was au	itnorizea by	the corporau	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its ointment as re	registered egistered	
SIGNATURE	Signature, typed or printed name of registered	agent and title if appl	cable. (NOTE:	Registered Age	nt signature requir				
12.			 	13.		ADDITIONS/CHANGES TO OFFICERS		ORS IN 12	
TITLE	PD		☐ DELETE	1.1 TITLE			Change	Addition Addition	
NAME	CIRABISI, GEORGE			1.2 NAME					
STREET ADDRESS	1278 VENETIAN WAY			13STREE	TADDRESS				
CITY-ST-ZIP	NAPLES FL 34110								
TITLE	ST		☐ DELETE	_			☐ Change	☐ Addition	
	CIRABISI, GEORGE								
NAME	_1278_VENETIAN WAY			Ħ	TADDDESS				
- STREET ADDRESS	NAPLES FL 34110	-	~	1					
CITY-ST-ZIP	NAPLES PL 34110		□ DELETE	_	S1-ZIP		☐ Change	Addition	
TITLE			☐ DEFETE						
NAME									
STREET ADDRESS				1					
CITY-ST-ZIP					ST-ZIP		Channa	□ Addition	
TITLE			☐ DEFELE	1			[_] change	LI Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	TADDRESS				
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP				
TITLE			☐ DELETE				∐J Change		
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	TADDRESS				
CITY-ST-ZIP				5.4 CITY-5	ST-ZIP	_			
TITLE			☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME				62 NAME					
STREET ADDRESS				6.3 STREE	TADDRESS				
STREET ADDRESS				6.4 CITY-					

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 of 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 from an attachment with an address, with all other like empowered.

SIGNATURE: