

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

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90035 030 \*\*\*150.00

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DOCUMENT # P98000096253

1. Corporation Name  
MOLANO HOLDINGS UNO, INC.



Principal Place of Business Mailing Address  
~~4625 UNIVERSITY DRIVE~~  
~~CORAL SPRINGS FL 33071~~  
1203 UNIVERSITY DR.  
CORAL SPRINGS FL  
33071

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 26  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 27  
City & State City & State  
23 28  
Zip Country Zip Country  
24 25 29 30

3. Date Incorporated or Qualified  
11/16/1998  
4. FEI Number 65-0875482 Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees  
8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
MOLANO, MARCO  
4625 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33071  
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
TITLE PD ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition  
NAME MOLANO, MARCO 1.2 NAME  
STREET ADDRESS 4625 UNIVERSITY DRIVE 1.3 STREET ADDRESS  
CITY-ST-ZIP CORAL SPRINGS FL 33071 1.4 CITY-ST-ZIP  
TITLE ☐ DELETE 2.1 TITLE ☐ Change ☐ Addition  
NAME 2.2 NAME  
STREET ADDRESS 2.3 STREET ADDRESS  
CITY-ST-ZIP 2.4 CITY-ST-ZIP  
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CITY-ST-ZIP 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

Date

Daytime Phone #

CR2E034 (1/98)