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

PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S03979

(9)

C. RIGOPOULOS, INC.

**FILED** 

Apr 25 1997 8:00am

Secretary of State

Principal Place of Business  B100 WEST MCNAB ROAD  NORTH LAUDERDALE FL 33068		Mailing Addres	85					
		8100 WEST MCNAB ROAD NORTH LAUDERDALE FL 33068-4138						
					3, Date Incorporated or Qualif. 10/04/1990		ate of Last R 26/1996	eport
2. Principal P	Place of Business	2a. Mailing Add	iress		4. FEI Number			plied For
21		26			1		t Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		¢0.75 .		Additional		
22		27	27		5. Certificate of Status Desired		Fee Re	equired
Oist 6 Canto			City & State		6. Election Campaign Financin	Q	\$5.00	May Be
23		28	28		Trust Fund Contribution			
, Zip	Country	Zip		ountry	8. This corporation has liability	for intangible	tax under s	. 199.032,
24	25	29]	30		Florida Statutes	🐧 Yes [		
	<ol><li>Name and Address of Curr</li></ol>	ent Registered Agent			10. Name and Address of Nev	v Registered	Agent	
RIG	OPOULOS, CHRIS			81 Name				
810	O WEST MCNAB ROAD			82 Street Ad	dress (P.O. Box Number is Not Acce	ptable)		
NOF	RTH LAUDERDALE FL 33068			360	> 5.W. 16 th a	<b>5</b> 71		
				83				
£ ,				84 City			<b>85</b> Zip (	Code _
•				1 B00	CA RATON, 1	FL		432
11. Pursuant	to the provisions of Sections 607.09	502 and 607.1508, Flo	ida Statutes, the	above-named co	irporation submits this statement for tation's board of directors. Fhereby a	he purpose o	changing it	s registered
agent. I a	am familiar with, and accept the obli	igations of, Section 60	7.0505, Florida S	talutes.	ation's board of directors, Frieleby a	ссері іне арі	omment as	registered
SIGNATURE	Signature, typed or printed name of registered a	igent and title it proficable	(NOT: Bogist	ered Agent signature red	juired when reinstating)	DATE		
12.		ND DIRECTORS	[ 1:		ADDITIONS/CHANGES TO C	FFICERS AND	DIRECTOR	RS IN 12
TITLE	D		DELETE 1.1	TITLE			Change	Addition
NAME	RIGOPOULOS, CHRIS		1.2	? NAME				
STREET ADDRESS	4441 N. 41ST CT.		1.3	STREET ADDRESS	360 S.W. 1677	517		
CITY-ST-ZIP	HOLLYWOOD FL			CITY - S1 - ZIP	360 S.W. 16th BOCA RATON	.FL.	3346	32.
TITLE			· · · · · · · · · · · · · · · · · · ·	I TITLE			Change	Addition
NAME			2.2	2 NAME				
STREET ADDRESS			23	S STREET ADDRESS	•			
CITY-ST-ZIP				4 CITY - ST - ZIP				
TITLE				I TITLE			Change	Addition
NAME				2 NAME				
STREET ADDRESS				STREET ADDRESS				
	1				-			
CITY-ST-ZIP TITLE				4. CITY-ST-ZIP 1 TITLE			Change	Addition
NAME		— ·		2 NAME				
				Z NAIVE 3 STREET ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP				1 CITY - ST - ZIP			☐ Change	Addition
TITLE	1	. ب		I TITLE			☐ AlianAc	ROUNION
NAME				? NAME				
STREET ADDRESS				STREET ADDRESS				
CITY-ST-ZIP				1 CITY - ST - ZIP			[] (h	Audota -
TITLE		L	l l	THILE			Change	Addition
NAME				? NAME				
STREET ADDRESS	1		6.3	STREET ADDRESS				
	,							

14. If do 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 viceiver 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 execute this report as required by Chapter 607. Florida Statutes; and that my name

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