

07151999-90002-031-\$150.00-\$150.00

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AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # S09318

1. Corporation Name
DATTALO, INC.

Principal Place of Business
6483 22ND ST. N.
ST. PETERSBURG FL 33702

Mailing Address
6483 22ND ST. N.
ST. PETERSBURG FL 33702

CHANGE TO ↓

2. Principal Place of Business

2760 62ND TERRACE

2a. Mailing Address

CARMEN F. DATTALO

Suite, Apt. #, etc.

ST. PETERSBURG FL

Suite, Apt. #, etc.

4106 SAVAGE STATION

City & State

City & State

New Port Richey FL

Zip 33702

Country

Zip

34653

Country

9. Name and Address of Current Registered Agent

DATTALO, CARMEN F.
1860 MASS AVE NE
APT 223
ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

10/29/1990

4. FEI Number

59-3033484

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. This corporation owes the current year
Intangible Personal Property.☐Yes ☐ No

10. Name and Address of New Registered Agent

81 Name CARMEN F. DATTALO
82 Street Address (P.O. Box Number is Not Acceptable)
4106 SAVAGE STATION CIRCLE
83 New Port Richey FL
84 City FL 85 Zip Code 34653

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 607.1505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT for Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME DATTALO, CARMEN F.
STREET ADDRESS 6483 22ND ST N.
CITY-ST-ZIP ST PETERSBURG FL

TITLE PRES. DENT
NAME CARMEN F. DATTALO
STREET ADDRESS 4106 SAVAGE STATION CIRCLE
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jul 15, 1999 8:00 am
Secretary of State

07-15-1999 90002 031 ***150.00



CR2E034 (5/99)