

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 14 PM 2:19

DOCUMENT # **S19312 (5)**

1. Corporation Name  
**ENRICO ENTERPRISES OF FLORIDA, INC.**

Principal Place of Business: **9999 COLLINS AVENUE #4E BAL HARBOUR FL 33154 US**  
Mailing Address: **6/O HUGHES & SILVERS - 1141 KANE CONCOURSE- BAY HARBOR ISLAND FL 33154 US**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Creation: **12/12/1990**  
3b. Date of Last Report: **02/04/1994**  
4. FID Number: **65-0239065**  
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 has liability for intangible tax under § 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business:  
21. Suite, Apt. #, etc.:  
22. City & State:  
23. Zip: Country:  
24. Zip: Country:  
25. Zip: Country:  
26. Mailing Address:  
27. Suite, Apt. #, etc.: **96 HUGHES SILVERS + GLASSMAN**  
28. City & State: **1140 KANE CONCOURSE - 5th FLR**  
29. Zip: Country:  
30. Zip: Country:

9. Name and Address of Current Registered Agent  
**SILVERS, ROBERT, HENRY  
6/O HUGHES & SILVERS  
1141 KANE CONCOURSE  
BAY HARBOR ISLANDS FL 33139**

10. Name and Address of New Registered Agent  
01. Name:  
02. Street Address (P.O. Box Number is Not Acceptable): **96 HUGHES SILVERS + GLASSMAN**  
03. City: **1140 KANE CONCOURSE - 5th FLR.**  
04. City: **FL**  
05. 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 of Registered Agent)

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>SACCHI, ENRICO</b>
STREET ADDRESS	<b>9999 COLLINS AVENUE 4 E</b>
CITY - ST - ZIP	<b>BAL HARBOUR FL</b>
TITLE	<b>D</b>
NAME	<b>SACCHI, SUSAN</b>
STREET ADDRESS	<b>9999 COLLINS AVENUE # 4E</b>
CITY - ST - ZIP	<b>BAL HARBOUR FL</b>
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

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exempt or state tax base of 11,000,000 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 thereon is the same as the one appearing on the certificate of incorporation or articles of incorporation of the corporation or the record or bylaws incorporated by reference into the report as required by Chapter 11, Florida Statutes, and that my name appears in Block 1 of the report, or on an attachment with an address.

SIGNATURE: **X** **Enrico Sacchi**  
SIGNATURE AND TYPED OR PRINTED NAME OF BEING OFFICER OR DIRECTOR

Feb 6 1995 (805) 947-8599