

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

FILED

Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S59898

(4)

1. Corporation Name

FUSCHETTO BROTHERS, INC.

Principal Place of Business

7011 SW 136TH AVE
FT LAUDERDALE FL 33330
US

Mailing Address

PO BOX 7765
HOLLYWOOD FL 33081
US



3. Date Incorporated or Qualified
06/14/1991

3a. Date of Last Report
03/15/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22
City & State

23
Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27
City & State

28
Zip

Country

30

4. FEI Number
65-0282268

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Trust Fund Contribution ☐ 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 s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FUSCHETTO, GIOVANNI
3185 TAFT STREET
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7011 S.W. 136 Avenue

83

84 City

FORT LAUDERDALE

FL

85 Zip Code

33330

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

TITLE D ☐ DELETE
NAME FUSCHETTO, GIOVANNI
STREET ADDRESS 3185 TAFT ST.
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE
NAME FUSCHETTO, MARIA
STREET ADDRESS 3185 TAFT ST.
CITY-ST-ZIP HOLLYWOOD FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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 7011 S.W. 136 Avenue
1.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33330

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 7011 S.W. 136 Avenue
2.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33330

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 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 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: MARIA FUSCHETTO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)