

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S80879** (7)
1. Corporation Name
MARCHESINI ENTERPRISES, INC.



Principal Place of Business Mailing Address
1441 E FLETCHER AVE STE 1300 **1441 E FLETCHER AVE STE 1300**
TAMPA FL 33612 **TAMPA FL 33612**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 RISTORANTE FRANCESCO	2a. Mailing Address SAME	3. Date Incorporated or Qualified 10/01/1991	4. FEI Number 59-3086451	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. 1441 E FLETCHER #1300	Suite, Apt. #, etc. ←	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
City & State 23 TAMPA FL	City & State 28	9. Name and Address of Current Registered Agent AHRENS, NICHOLA G. 902 N ARMENIA AVE TAMPA FL 33609	10. Name and Address of New Registered Agent 81 Name FRANCESCO MARCHESINI 82 Street Address (P.O. Box Number is Not Acceptable) 1441 E FLETCHER AVE 83 SUITE 1300 84 City TAMPA FL 85 Zip Code 33612	
Zip 24 33612	Country 25 HILLESBOROUGH FL	Zip 30	Country 31	

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 *Francesco Marchesini*

8-15-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE MARCHESINI, FRANCESCO FRANCESCO	1.1 TITLE FRANCESCO (EP)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 14516 N ROME AVE		1.2 NAME FRANCESCO (EP)	
STREET ADDRESS TAMPA FL		1.3 STREET ADDRESS	
CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	
TITLE VP	<input type="checkbox"/> DELETE MARCHESINI, FRANCESCO FRANCESCO	2.1 TITLE FRANCESCO (EP)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 14516 N ROME AVE		2.2 NAME	
STREET ADDRESS TAMPA FL		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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.

SIGNATURE: *Francesco Marchesini*

7-14-98 (813) 977-3110

CR2E034 (5/98)

PJD

July 13, 1998

Florida Department of State
Corporation Annual Report
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

Enclosed please find our second submission of our Corporate Annual Report.

The original, which was mailed April 13, 1998 had been returned according to the person responding to our phone inquiry of July 10, 1998.

We are perplexed as to why the first mailing did not come back to us, as all correspondence from your office has always been delivered promptly. Additionally, our attorney says she did not received your mailing.

Please note we will no longer use our attorney as Registered Agent, but will use Francesco Marchesini, president, for agent. Also, please note the spelling correction in "Francesco".

Also, enclosed please find duplicate check for \$150.00, filing fee. We will issue a stop-payment on the first check. Please return it if the US Post Office delivers our original mailing.

Thank you for your cooperation in this matter.

Sincerely,

Francesco Marchesini
President

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