

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT #

V04723

(5)

1. Corporation Name

DINOVA INC.



Principal Place of Business

Mailing Address

580 EAST ASH STREET  
PERRY FL 32347

580 EAST ASH STREET  
PERRY FL 32347

3. Date Incorporated or Qualified

01/03/1992

3a. Date of Last Report

04/13/1995

4. FEI Number

59-3101027

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 s. 199.032,  
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

DIRUBBIO, MARIE A.  
580 EAST ASH STREET  
PERRY FL 32347

81. Name

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

83.

84. City

FL

85. 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, typed or printed name of registered agent and the filer of this filing.

(If filer is Registered Agent, signature is required when re-registering.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
DIRUBBIO, VINCENT  
580 EAST ASH STREET  
PERRY FL

☐ DELETE

1. TITLE  
12. NAME  
13. STREET ADDRESS  
14. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
DIRUBBIO, MARIE A.  
580 EAST ASH STREET  
PERRY FL

☐ DELETE

2. TITLE  
22. NAME  
23. STREET ADDRESS  
24. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
GALINSKI, EDMUND V.  
10 RIDGE ROAD  
NEWTON NJ

☐ DELETE

3. TITLE  
32. NAME  
33. STREET ADDRESS  
34. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
GALINSKI, MARY M.  
10 RIDGE ROAD  
NEWTON NJ

☐ DELETE

4. TITLE  
42. NAME  
43. STREET ADDRESS  
44. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

5. TITLE  
52. NAME  
53. STREET ADDRESS  
54. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

6. TITLE  
62. NAME  
63. STREET ADDRESS  
64. CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

MARIE DIRUBBIO, SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Marie Dirubbio*

4-9-96

904-584-3690

City, State, Zip

CR2E034 (12/95)