

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # V42197

1. Entity Name
FLORIDA INSTALLATIONS, INC.



Principal Place of Business
4270 ALOMA AVE
STE 124-65-B
WINTER PARK, FL 32792 US

Mailing Address
4270 ALOMA AVE
STE 124-65B
WINTER PARK, FL 32792 US



04222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3149122

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DULIOKI, JOHN A.
4270 ALOMA AVENUE #124
SUITE 65B
WINTER PARK, FL 32792

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	DULIOKI, JOHN A.
STREET ADDRESS	4270 ALOMA AVE., #124
CITY-ST-ZIP	WINTER PARK, FL
TITLE	T
NAME	DULIOKI, JOHN A.
STREET ADDRESS	4270 ALOMA AVE., #124
CITY-ST-ZIP	WINTER PARK, FL
TITLE	VP
NAME	DULIOKI, CYNTHIA J.
STREET ADDRESS	4270 ALOMA #124 65-B
CITY-ST-ZIP	WINTER PARK, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UN00000327778
04/25/05-80052-006 150.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John A. Dulio* **JOHN A. DULIOKI PRES.** 4-20-05 407-257-7741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #