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FILED

Feb 07 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 # V56725

(7)

1. Corporation Name  
AUDINO ENTERPRISES, INC.

Principal Place of Business

4326 KEYSVILLE AVE  
SPRING HILL FL 34606

Mailing Address

4326 KEYSVILLE AVE  
SPRING HILL FL 34606-3318

3. Date Incorporated or Qualified

08/03/1992

3a. Date of Last Report

02/20/1996

2. Principal Place of Business

21 5143 COMMERCIAL WAY

Suite, Apt. #, etc.

22

City & State

23 SPRING HILL, FL

Zip

24 34606

Country

25

2a. Mailing Address

26 5143 COMMERCIAL WAY

Suite, Apt. #, etc.

27

City & State

28 SPRING HILL, FL

Zip

29 34606

Country

30

4. FEI Number

59-3136874

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

9. Name and Address of Current Registered Agent

AUDINO, ANTHONY F  
4326 KEYSVILLE AVE  
SPRING HILL FL 34606

10. Name and Address of New Registered Agent

81 Name

MICHAEL J. KIERZYNSKI

82

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

5143 COMMERCIAL WAY

83

84

City

SPRING HILL

FL

85

Zip Code

34606

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

*Michael J. Kierzynski*

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

01/27/97

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME AUDINO, ANTHONY F.

STREET ADDRESS 4326 KEYSVILLE AVE

CITY-ST-ZIP SPRING HILL 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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S/T ☒ Change ☐ Addition

1.2 NAME AUDINO, ANTHONY F.

1.3 STREET ADDRESS 5143 COMMERCIAL WAY

1.4 CITY-ST-ZIP SPRING HILL, FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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:

*Anthony Audino*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/97

Date

847-823-1212

Daytime Phone #

CR2E034 (9/96)