

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 # V59189 (3)

1. Corporation Name

DOMUS FLORIDA CONSTRUCTION AND INVESTMENT MANAGEMENT, INC.

Principal Place of Business

Mailing Address

2172 NE 168 ST.  
NORTH MIAMI BEACH FL 33162  
US

2172 NE 168 ST.  
NORTH MIAMI BEACH FL 33162  
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

THE MASTERS OF THE ITALIAN ART, INC  
326 PERUVIAN AVE N. 5  
PALM BEACH FL 33480

3. Date Incorporated or Qualified

08/21/1992

3a. Date of Last Report

08/15/1995

4. FEI Number

65-0359512

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

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 date

(If Not Registered Agent Signature Required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
D BELLUZZO, MARIA TERESA  
STREET ADDRESS  
RES. CORSO PALESTRO 10  
CITY-ST-ZIP  
25121 BRESCIA, ITALY

TITLE ☐ DELETE

NAME  
D RICCI, ALBERTO  
STREET ADDRESS  
RES. CORSO PALESTRO 10  
CITY-ST-ZIP  
25121 BRESCIA, ITALY

TITLE ☐ DELETE

NAME  
S RICCI, VERONICA  
STREET ADDRESS  
100 LINCOLN ROAD, #1640  
CITY-ST-ZIP  
MIAMI BCH 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

700001897287  
-07/18/96--01008--002  
\*\*\*8.75

800001897288  
-07/18/96--01008--003  
\*\*\*225.00

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 supplied with 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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/96

Exhibit Page #

CR2E034 (12/95)