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Feb 10 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 # V73967

(4)

1. Corporation Name

POLISENA ENTERPRISE, INC.

Principal Place of Business

3700 MERCANTILE AVE
NAPLES FL 33942
US

Mailing Address

3700 MERCANTILE AVE
NAPLES FL 34104-3355
US



3. Date Incorporated or Qualified

10/22/1992

3a. Date of Last Report

02/23/1996

4. FEI Number

65-0422459

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

2. Principal Place of Business

21 3700 Mercantile

Suite, Apt. #, etc.

22 Ave.

City & State

23 NAPLES FL

Zip

24 34104

Country

25 US

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

NIKOS CHINTAKIS
3700 MERCANTILE AVENUE
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name

NIKOS CHINTAKIS

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

3700 MERCANTILE AVE

83

84 City

NAPLES

FL

85 Zip Code

34104

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

Nikos Chintakis, President

(NOTE: Registered Agent signature required when reinstating)

1/14/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME CHINTAKIS, NIKOS
STREET ADDRESS 46 BENNINGTON DRIVE, #5
CITY-ST-ZIP NAPLES FL

TITLE D
NAME NICOLINO, POLISENA
STREET ADDRESS 45 HIGH POINT CIRCLE / STE - 307
CITY-ST-ZIP NAPLES FL

TITLE VP
NAME CUMMINS, WILLIAM
STREET ADDRESS 108-4 SANTA CLARA DRIVE
CITY-ST-ZIP NAPLES FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nikos Chintakis

1/14/97

941-643-7595

CR2E034 (9/96)