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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Feb 10 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V73967

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POLISENA ENTERPRISE, INC.

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Principal Plac		Mailing Address			e samer antan enabl enieb ebliå Bl	***************************************)		1.mir 1864	
3700 MERCANTILE AVE NAPLES FL 33942 US		3700 MERCANTILE AVE NAPLES FL 34104-3355 US								
		05		·	3. Date Incorporated or Qual 10/22/1992	lified	3a. Date o		eport	
	lace of Business	2a. Mailing Address		4. REI Number			Applied For			
1 370		26				65-0422459			Not Applicable	
Suite, Apt #, etc 2 AVC. City & State 3 NAPLES FL Zip Country		Suite, Apt. #, etc.			5. Certificate of Status Desire	\$	\$8.75 Additional Fee Required			
		City & State				6. Election Campaign Financing\$5.00 May				
		Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,					
4 34	104 25 US	29	30		Florida Statutes	×			. 100.002,	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of No	ew Regis	stered Age	nt		
NIKO	OS CHINTAKIS		81	Name A	ITKOS CHIA	171	WTC.			
3700	MERCANTILE AVENUE		82	Stroot Add		////	(14)			
	LES FL 33942		02	370	ress (P.O. Box Number is Not Acc	eptable	- 1	VE		
			83		O TIENCHIOT	~ ~ ~ ~		<u> </u>		
			L							
			84	City /	APLES		, B	5 Z _{IP} (Çode	
14 D	40	20 1002 4000 51 11 0					FL	34	104	
office or r	to the provisions of Sections 607 050 registered agent, or both, in the State am familiar with, and accept the oblig	uz and 607.1508, Florida St e of Florida. Such change w	atutes, the abov as authorized b	e-named corp v the corporal	Doration submits this statement for tion's board of directors. I bereby	r the pur accept t	pose of cha	anging it	s registered	
					monto by and by modern or throng	accopt t	inc appoint	noin as	regiatered	
agent. La	im familiar with, and accept the oblig	ations of, Section 607.0505	, Florida Statute	S. 1	11/11/2					
			, Florida Statute		Alex		///4/	197)	
SIGNATURE	Signature, typed or printed name of registered ag	ont and title if applicable.	, Florida Statute NOTE: Register d Ag	///4/	art co		//4/	197	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. ID DIRECTORS	nt f	///4/	art co		DATE DATE	197	,	
SIGNATURE.	Signatur, reported name of registered ag OFFICERS AN	ont and title if applicable.	17 NOTE: Registered Ac	///4/	red when reinstating)		DATE RS AND DIF	197	RS IN 12	
SIGNATURE.	Signature reported name of registered ag OFFICERS AN P CHINTAKIS, NIKOS	ent and title if applicable. ID DIRECTORS	NOTE: Registered Ag	///4/	red when reinstating)		DATE RS AND DIF	/97 RECTOR	RS IN 12	
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