FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 300021

(3)

INGRAVERA ENTERPRISES, INC.

Principal Place of Business Mailing Address

700 COLUMBUS AVENUE - SUITE 10K

NEW YORK CITY MY 10035

FILED Jan 21 1997 8:00am Secretary of State



NEW YORK CIT	Y NY 10025	NEW YORK CITY NY 10025-6826								
						3. Date Incorporated or Qualified 12/23/1965		te of La 31/18	ast Repor	rt
2. Principal Pia	2a. Mailing Address				4. FEI Number	<u></u>		Applie	d For	
21		26				59-1233991			Not Ap	plicable
Suite, Apt #	≠, etc	Suite, Apt. #. etc.				5. Certificate of Status Desired			75 Addit e Requir	
City & State 23		City & State				Election Campaign Financing Trust Fund Contribution			.00 May	
Zip	Country	Zφ	Cou	ıntry		8. This corporation has liability for i	ntangible	tax un	der s. 199	9.032,
24	25	29	30			Florida Statutes] Yes [] No		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered /	gent		
	MER, AMY OLIVE			81	Name					
	N.W. 22ND ST.			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
MIAI	VII FL 33127			83			·			
				84	City			85	Zip Code	е
					i	poration submits this statement for the p	<u>FL</u>	\perp		
SIGNATURE	gistered agent or both, in the state in familiar with, and accept the obligation Signature typed or pholed barne of registered age					tion's board of directors. I hereby acception is board of directors. I hereby acception is a second of directors.	DATE		ii as regi	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	CTORS IN	l 12
1)TLE	PD	☐ DELETE	1.1 11	ITLE				☐ Chi	inge 🗀	Addition
NAME	INGRAVERA JR,LUIS R		1.2 N	AME						
STREET ADDRESS	700 COLUMBUS AVE.		1.3 S	TREET	ADDRESS					
CITY - \$1 - 7161	NEW YORK NY		1.4 CITY - ST		IT-ZIP					
TITLE	VD	DELETE	2.1 T	ITLE				Ch	ange [Addition
NAME	INGRAVERA, LISA MARIE		2.2 NA							
STREET ADDRESS	700 COLUMBUS AVE.		2.3 STREET ADDI		ADDRESS					
CITY - ST - ZIP	NEW YORK NY			2. 4 CITY - ST		· · · · · · · · · · · · · · · · · · ·				T
TITLE	CULMER,AMY OLIVE		3.1 Ti					☐ Ch	ange L	_ Addition
NAME	583 N.W. 22ND STREET		32 N							
STREET ADDRESS	MIAMI FL				ADDRESS					
C(TY - S1 - Z(P	T	DELETE			ST-ZIP			Ch	nge I	Addition
THILE	INGRAVERA JR,LUIS R.		41T			•			inge L	T Vooiiion
NAME DAVISER ADDRESS	700 COLUMBUS AVE.		4 2 1		ACCORTÉ					
STREET ADDRESS	NEW YORK NY			4.3 STREET ADDRESS 4.4 City - St-ZiP						
CITY - S1 - 7IP		DELETE	517	_	71-6IF			☐ Ch	inge T	Addition
NAME			5.2 N		,				-	
STREET ADDRESS					ADRESS					
CITY-ST-ZIP				5.4 CITY-STILIP						
TITLE	DELETE			6.1 TITLE			 -	☐ Ch	ange [Addition
NAME			6.2 N						_	
STREET ADDRESS					A DRESS					
CITY-ST-ZIP					ST-ZIP					
	ov certify that the information supplie	o with this filing does not oue				d in Section 119.07(3)(i), Florida Statute	s I furthe	certify	that the	

I do fige by certify defined the information spirited with this time does not deathly for the example of the control of the corpy attention indicated on this annual report or supplemental armore report is true and accounted that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corpy attention 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 artistance with an address.

SIGNATURE:

1/08/97 (718) 863-2487