FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 PM 12:55

DOCUMENT # F09495 (5)

1. Corporation Name
MACHO PRODUCTS, INC.

Principal Place of Business	Mailing Address
10045-102ND TERRACE SEBASTIAN FL 32958	10045-102ND TERRACE SEBASTIAN FL 32958

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/17/1980
3a. Date of Last Report: 02/16/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 59-2069844 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ XX $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 ☒ XX Yes ☐ No

9. Name and Address of Current Registered Agent

EVANS, JOHN G
11155 ROSELAND RD, UNIT 1
SEBASTIAN FL 32958

10. Name and Address of New Registered Agent

81 Name: Not applicable
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: Not Applicable
(Signature, type or print name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	ABLEMAN, MICHAEL R.	1.2 NAME	
STREET ADDRESS	11155 ROSELAND ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ROSELAND FL	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	☐ Change ☐ Addition
NAME	PARKER, CLIVE	2.2 NAME	
STREET ADDRESS	11155 ROSELAND RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ROSELAND FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	EVANS, JOHN G	3.2 NAME	
STREET ADDRESS	11155 ROSELAND RD UNIT 1	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEBASTIAN FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	REINHALTER, ROBERT G.	4.2 NAME	
STREET ADDRESS	11195 ROSELAND ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROSELAND FL	4.4 CITY-ST-ZIP	
TITLE	PR	5.1 TITLE	☐ Change ☐ Addition
NAME	GORDON, DUDLEY J.	5.2 NAME	
STREET ADDRESS	3936 LAKESIDE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I/We 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)(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 above, or on an attachment with an address.

SIGNATURE: John G. Evans
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date: January 9, 1995 (Daytime Phone #) (407) 388-9892

0074044 CP