

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATE AFFAIRS

APPROVED
7/10/95

SEVEN 11 26

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # L29267 (6)

1. Corporation Name

MOMAR INVESTMENTS, INC.

Principal Place of Business

**448 HOLIDAY DR
HALLENDALE FL 33009**

Mailing Address

**448 HOLIDAY DR
HALLENDALE FL 33009**

Do not write in this space

3. Date incorporated or dissolved **11/08/1989** 38. Date of Last Report **02/28/1994**

4. FEI Number **65-0193195** 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

6. This corporation has instantly for its purposes been organized under the laws of the State of Florida ☒ Yes ☐ No

2. Principal Place of Business

21. Name of Agent

22. City & State

23. City & State

24. City & State

2a. Mailing Address

26. Name of Agent

27. City & State

28. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

**NANOIA, MAURICE, JR
448 HOLIDAY DR
HALLENDALE FL 33009**

10. Name and Address of New Registered Agent

B1. Name

B2. Street Address (P.O. Box Number is Not Acceptable)

B3. City

B4. City

FL

B5. Zip Code

11. Pursuant to the provisions of Section 607.01(2) and (3), Florida Statutes, this 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. My term will expire on the date specified in Section 607.01(2), Florida Statutes.

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME

**P
NANOIA, JR., MAURICE
448 HOLIDAY DR
HALLENDALE FL**

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

1. NAME

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19. NAME

20. NAME

21. NAME

22. NAME

23. NAME

24. NAME

25. NAME

SIGNATURE:

MAURICE NANOIA JR
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PRESIDENT

4/26/95

205-585-7080