

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

**APPROVED
AND
FILED**

95 MAY 16 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M04522** (2)
1. Corporation Name
PORT LAUDANIA, INC.

Principal Place of Business Mailing Address
1100 NE 7TH AVE., SUITE C **1100 NE 7TH AVE., SUITE C**
STE. A **STE. A**
DANIA FL 33004-9502 **DANIA FL 33004-9502**
US **US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/28/1984** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-2438128** 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 liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2b. Mailing Address
21 Suits, Apt. #, etc. 26 Suits, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOUSTON, BART
100 NE 3RD AVE., SUITE 850
FT. LAUDERDALE FL 33301

81 Name
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HOUSTON, J. EDWARD
STREET ADDRESS	1100 NE 7TH AVE #A
CITY-ST-ZIP	DANIA FL
TITLE	AS
NAME	TAGG, JOANN H.
STREET ADDRESS	1100 NE 7TH AVE #A
CITY-ST-ZIP	DANIA FL
TITLE	AS
NAME	RODRIGUEZ, OLIVERO
STREET ADDRESS	1100 NE 7TH AVE STE A
CITY-ST-ZIP	DANIA FL
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	AS <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	V/T <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	JIMENEZ, VINCENT W.
3.3 STREET ADDRESS	1100 N.E. 7th Avenue Ste A
3.4 CITY-ST-ZIP	Dania, FL 33004
4.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PHIPPS, ZADA B.
4.3 STREET ADDRESS	1100 N.E. 7th Avenue Ste B
4.4 CITY-ST-ZIP	Dania, FL 33004
5.1 TITLE	S <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	HOUSTON, PATRICIA P.
5.3 STREET ADDRESS	1100 N.E. 7th Avenue Ste B
5.4 CITY-ST-ZIP	Dania, FL 33004
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *Vincent W. Jimenez* **Vincent W. Jimenez, V.P.** **5/10/95** **(305) 920-2581**
Signature and typed or printed name of signing officer or director