

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

CORPORATION
ANNUAL REPORT
1995



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

95 MAR 17 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000000809

1. Corporation Name

MEGAS ALEXANDROS INC

600001435586

-03/21/95--01136-017

*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/03/1993

3a. Date of Last Report

4. FEI Number

59-3176889

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

TOMAS DIMITRIOS
125 S HOLLYWOOD AVE.
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PRESIDENT
KOSTARIDIS, SPYROS
744 HAMLET DRIVE
PORT ORANGE FL 32127

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VICE PRESIDENT
SKANDALAKIS, RENOS
230 N. HALIFAX
ORANGE BEACH FL 32176

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SECRETARY
DIMITRIOS TOMAS
125 S HOLLYWOOD AVE
DAYTONA BEACH FL 32118

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TREASURER
MARIA TOMAS
125 S HOLLYWOOD AVE
DAYTONA BEACH FL 32118

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DIRECTOR
EPITROPOULOS, SAM
533 N. HALIFAX DR
ORANGE BEACH FL 32118

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DIRECTOR
KOSTARIDIS, KOSTAS
744 HAMLET DRIVE
PORT ORANGE FL 32127

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 119.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR

DIMITRIOS TOMAS

REC. 3/13/95

Date

Signature (Typed Name)

8W 3-17-95