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 -1 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000004004 (7)**

1. Corporation Name
YMCB, INC.

Principal Place of Business	Mailing Address
5011 DIXIE HIGHWAY SUITE 209A PALM BAY FL 32905	5011 DIXIE HIGHWAY SUITE 109 A PALM BAY FL 32905 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/10/1992**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26

4. FEI Number: **59-3151806** ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. — 22 / 27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23 / 28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24 / 29 — County — 25 / 30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BARBONI, YVONNE C
5011 DIXIE HIGHWAY
SUITE 209A
PALM BAY FL 32905

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 the 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 and am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Yvonne C Barboni — President

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95
TYPE: D NAME: BARBONI, YVONNE C STREET ADDRESS: 5011 DIXIE HIGHWAY N.E. CITY-ST-ZIP: PALM BAY FL 32905	TYPE: ☐ Change ☐ Addition
TYPE: NAME: Vice President STREET ADDRESS: Diana Barboni CITY-ST-ZIP: 5011 Dixie Hwy NE A109 Palm Bay Fl 32905	TYPE: ☐ Change ☐ Addition
TYPE: NAME: Treasurer STREET ADDRESS: Christopher Barboni CITY-ST-ZIP: 5011 Dixie Hwy NE A109 Palm Bay Fl 32905	TYPE: ☐ Change ☐ Addition
TYPE: NAME: STREET ADDRESS: CITY-ST-ZIP:	TYPE: ☐ Change ☐ Addition
TYPE: NAME: STREET ADDRESS: CITY-ST-ZIP:	TYPE: ☐ Change ☐ Addition
TYPE: NAME: STREET ADDRESS: CITY-ST-ZIP:	TYPE: ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurate and that this entity is not required, by the provisions of Chapter 607, Florida Statutes, to file, and is not filing, a report for any other state or jurisdiction. I further certify that the information indicated on this report or supplemental annual report is true and complete 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 1, 12, or 13 above, with an asterisk, or on an attachment with an asterisk.

SIGNATURE: Yvonne Barboni — President — 4-28-95 — 984-2311
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0410015 FP