

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:23

DOCUMENT # P93000020757 (9)

1. Corporation Name

3901, INC.

Principal Place of Business

Mailing Address

**3901 NORTH 29TH AVE.
 HOLLYWOOD FL 33030**

**3901 NORTH 29TH AVE.
 HOLLYWOOD FL 33030**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/19/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0397605

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

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MARBIN, EVAN R
 48 EAST FLAGLER ST.
 PENTHOUSE 104
 MIAMI FL 33131**

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 must be printed name of registered agent and the date

Signature must be printed name of registered agent and the date

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY, ST, ZIP

**D
 COHEN, FREEMAN
 3901 NORTH 29TH AVE.
 HOLLYWOOD FL 33020**

1. TITLE
 2. NAME
 3. STREET ADDRESS
 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 110.07(3)(b), 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:

Freeman Cohen
 FREEMAN COHEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/95 Jos. P. V. 7100
 Jos. P. V. 7100