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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P93000030246 (1)**

1. Corporation Name
MICHAEL BANTUM, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
~~1386 PARMA AVENUE~~ ~~PORT ST. LUCIE FL 34953~~
~~1386 PARMA AVENUE~~ ~~PORT ST. LUCIE FL 34953~~

3. Date Incorporated or Qualified **04/26/1993** 3a. Date of Last Report **04/28/1994**

2. Principal Place of Business 2a. Mailing Address
21 **2196 SW 96th St** 26 **2196 SW 96th St**
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number **65-0405977** Applied For
Not Applicable

22 City & State 27 City & State
Stuart, FL **Stuart, FL**

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

23 Zip 28 Zip 29 Country 30 Country
34997 **Martin** **34997** **Martin**

6. Election Campaign Financing **\$5.00** May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BANTUM, MICHAEL
~~1386 PARMA AVENUE~~
~~PORT ST. LUCIE FL 34953~~

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
2196 SW 96th St
B3
B4 City **Stuart** FL B5 Zip Code **34997**

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 _____ DATE _____
Signature, typed or printed name of registered agent (not title if applicable) NOTE: Registered Agent signature required when registering

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **BANTUM, MICHAEL**
STREET ADDRESS **1388 SOUTHWEST PARMA AVENUE**
CITY - ST - ZIP **PORT ST. LUCIE FL 34953**

1 1 TITLE Change Addition
1 2 NAME
1 3 STREET ADDRESS **2196 SW 96th St**
1 4 CITY - ST - ZIP **Stuart, FL 34997**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2 1 TITLE Change Addition
2 2 NAME
2 3 STREET ADDRESS
2 4 CITY - ST - ZIP

NAME
STREET ADDRESS
CITY - ST - ZIP

3 1 TITLE Change Addition
3 2 NAME
3 3 STREET ADDRESS
3 4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4 1 TITLE Change Addition
4 2 NAME
4 3 STREET ADDRESS
4 4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5 1 TITLE Change Addition
5 2 NAME
5 3 STREET ADDRESS
5 4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6 1 TITLE Change 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 119.07(3)(h), 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 as an attachment with an address.

SIGNATURE: A. Michael Bantum A. Michael Bantum 4-17-95 (407) 285-1058
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Expiration Period