

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000014923 (4)

1. Corporation Name

AMERI FINANCIAL SERVICES, INC.

Principal Place of Business

**1405 SOUTH FEDERAL HIGHWAY
UNIT 134
DELRAY BEACH FL 33483**

Mailing Address

**1405 SOUTH FEDERAL HIGHWAY
UNIT 134
DELRAY BEACH FL 33483**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/24/1994

3a. Date of Last Report

02/24/94

4. FEI Number

65-0480893 000

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

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

2. Principal Place of Business

21 3200 N. Federal Highway

2a. Mailing Address

3200 N. Federal Highway

Suite, Apt. #, etc.

22 Suite 206-1

Suite, Apt. #, etc.

27 Suite 206-1

City & State

23 Boca Raton, FL

City & State

28 Boca Raton, FL

Zip

24 33431

Country

25 Palm Beach

Zip

29 33431

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

**LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

Arthur Murray Citron

82 Street Address (P.O. Box Number is Not Acceptable)

3200 N. Federal Highway

83

Suite 206-1

84 City

Boca Raton

FL

85 Zip Code

33431

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 **ARTHUR MURRAY CITRON V.P.**

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

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

DATE

4/26/95

12. OFFICERS AND DIRECTORS

TITLE **P**
NAME **FLEISCHER, JANET S**
STREET ADDRESS **1405 SOUTH FEDERAL HIGHWAY, UNIT 134**
CITY - ST - ZIP **DELRAY BEACH FL 33483**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **V. PRES** ☐ Change ☒ Addition
1.2 NAME **ARTHUR MURRAY CITRON**
1.3 STREET ADDRESS **8482 BOCA GRADES BLVD EAST**
1.4 CITY - ST - ZIP **BOCA RATON FL 33434**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
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 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:

JANET S. FLEISCHER

4/26/95

(Date)

407-392-4005

(Telephone Number)