

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 16 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000022950 (7)**

1. Corporation Name
GAIL HANRAHAN, INC.

Principal Place of Business
**2676 SE 14TH ST
POMPANO BEACH FL 33062**

Mailing Address
**2676 SE 14TH ST
POMPANO BEACH FL 33062**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/21/1994

3a. Date of Last Report

2. Principal Place of Business

21 **S CHURCH ST.**
Suite, Apt. #, etc.

22 **PISCATAWAY N.J.**
City & State

23 **09854**
Zip

24 **09854**
Country

25

2a. Mailing Address

26 **S CHURCH ST.**
Suite, Apt. #, etc.

27 **PISCATAWAY N.J.**
City & State

28

29 **09854**
Zip

30

31

4. FEI Number
65-0487296

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

9. Name and Address of Current Registered Agent

**HANRAHAN, GAIL
2676 SE 14TH ST
POMPANO BEACH FL 33062**

10. Name and Address of New Registered Agent

81 Name **S. DUQUE JR. C.P.A.**

82 Street Address (P.O. Box Number is Not Acceptable)
101 N.E. 3RD AVE, SUITE 300

83

84 City **FT. LAUDERDALE** FL 85 Zip Code **33301**

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 **S. DUQUE JR. C.P.A.** **S. L. L. C.P.A.** **4-25-95**

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	HANRAHAN, GAIL
STREET ADDRESS	2676 SE 14TH ST
CITY ST ZIP	POMPANO BEACH FL 33062
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	S CHURCH ST.
14 CITY ST ZIP	PISCATAWAY N.J.
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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)(b), Florida Statutes. I further certify that the information included 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 and certified by an officer or director of the corporation or the receiver or trustee empowered to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **GAIL HANRAHAN** *Gail Hanrahan* **3/10/95** **(908) 968-0524**