

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

*** CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Morgan
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95MAY-1 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V05786

1. Corporation Name

FLORIDA INTELLIGENCE & RESEARCH GROUP, INC.

200001519132

-06/21/95--01037--004

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

7600 RED ROAD #202
S. MIAMI, FL 33243

P.O. Box 792
S. MIAMI, FL 33243

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

USA

29

30

USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

1-13-92

4-29-94

4. FEI Number

65-0321508

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

TOMAS RATNER

6340 SW 84 ST

85

S. MIAMI,

FL

Zip Code
33143

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

T. H. RATNER T. H. RATNER

4-27-95

(Signature, typed or printed name of registered agent and then if acceptable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

PRES
TOMAS H. RATNER
P.O. BOX 792
S. MIAMI, FL 33243

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

V.P.
NORMAN E. CABLE
P.O. BOX 792
S. MIAMI, FL 33243

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

SEC. - TREAS.
BARBARA J. RATNER
P.O. BOX 792
S. MIAMI, FL 33243

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

V.P.
MICHAEL P. EATON
P.O. BOX 792
S. MIAMI, FL 33243

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

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

LAW ENFORCEMENT

N/A

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

LAW ENFORCEMENT

N/A

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

LAW ENF. FAMILY

N/A

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

N/A

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

REMITTED BY MAY 1

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)(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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *T. H. RATNER* T. H. RATNER, PRES.

4-27-95 305-666-8070

(Signature and typed or printed name of signing officer or director)

Date

(Phone Number)