

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

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**95 MAR -1 PM 2:20**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**DOCUMENT # V58420 (3)**

**1. Corporation Name  
GET SMART NO. 36, INC.**

**Principal Place of Business Mailing Address  
11751 S. DIXIE HWY. MIAMI FL 33156 11751 S. DIXIE HWY. MIAMI FL 33156**

DO NOT WRITE IN THIS SPACE.

**3. Date incorporated or Qualified 08/17/1992 3a. Date of Last Report 03/14/1994**

**4. FEI Number 65-0521542 Applied For - 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**

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b>	Suite, Apt. #, etc.	<b>26</b>	Suite, Apt. #, etc.
<b>22</b>	City & State	<b>27</b>	City & State
<b>23</b>	Zip Country	<b>28</b>	Zip Country
<b>24</b>	<b>25</b>	<b>29</b>	<b>30</b>

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**BERNSTEIN, CAROLE  
13724 SW 84TH ST.  
MIAMI FL 33183**

<b>81</b>	Name
<b>82</b>	Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>	
<b>84</b>	City
<b>85</b>	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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signatures required when reinstating)

DATE

**OFFICERS AND DIRECTORS**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<b>TITLE</b>	<b>PD</b>	<b>1.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>BERNSTEIN, CAROLE</b>	<b>12 NAME</b>	
<b>STREET ADDRESS</b>	<b>13724 SW 84TH ST.</b>	<b>13 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	<b>MIAMI FL 33183</b>	<b>14 CITY-ST-ZIP</b>	
<b>TITLE</b>		<b>2.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>22 NAME</b>	
<b>STREET ADDRESS</b>		<b>23 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>24 CITY-ST-ZIP</b>	
<b>TITLE</b>		<b>3.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>32 NAME</b>	
<b>STREET ADDRESS</b>		<b>33 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>34 CITY-ST-ZIP</b>	
<b>TITLE</b>		<b>4.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>42 NAME</b>	
<b>STREET ADDRESS</b>		<b>43 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>44 CITY-ST-ZIP</b>	
<b>TITLE</b>		<b>5.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>52 NAME</b>	
<b>STREET ADDRESS</b>		<b>53 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>54 CITY-ST-ZIP</b>	
<b>TITLE</b>		<b>6.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>62 NAME</b>	
<b>STREET ADDRESS</b>		<b>63 STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>64 CITY-ST-ZIP</b>	

**14. I 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: Carole Austin Carole Bernstein 1/31/95 (305) 378-0834**