

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMMIE D. WHITMAN
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # 402558

(1)

THE 94TH OF FORT LAUDERDALE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 4155 E LA PALMA AVE
SUITE 250
ANAHEIM CA 92807

Mailing Address: 4155 E LA PALMA AVE
SUITE 250
ANAHEIM CA 92807

2. Principal Place of Business: 21
State: Apt. # 22
City & State: 23
County: 24
Country: 25

2a. Mailing Address: 26
State: Apt. # 27
City & State: 28
County: 29
Country: 30

3. Date incorporated or Qualified: 06/05/1972
3b. Date of Last Report: 05/01/1994
4. FEI Number: 95-2954993
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
7. This corporation has liability for intangible tax under s. 199.04, Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	AS MCMAHON, JUDITH	13.1 NAME	☐ Change ☐ Addition
12.2 STREET ADDRESS	4155 E LA PALMA AVE #250	13.2 STREET ADDRESS	
12.3 CITY, ST, ZIP	ANAHEIM CA	13.3 CITY, ST, ZIP	
12.4 NAME	VD TALICHET, CECILIA	13.4 NAME	☐ Change ☐ Addition
12.5 STREET ADDRESS	4155 E LA PALMA AVE #250	13.5 STREET ADDRESS	
12.6 CITY, ST, ZIP	ANAHEIM CA	13.6 CITY, ST, ZIP	
12.7 NAME	PD TALICHET, DAVID C., JR.	13.7 NAME	☐ Change ☐ Addition
12.8 STREET ADDRESS	4155 E LA PALMA AVE #250	13.8 STREET ADDRESS	
12.9 CITY, ST, ZIP	ANAHEIM CA	13.9 CITY, ST, ZIP	
12.10 NAME	AT ROYSE, BOB D	13.10 NAME	☐ Change ☐ Addition
12.11 STREET ADDRESS	4155 E LA PALMA AVE #250	13.11 STREET ADDRESS	
12.12 CITY, ST, ZIP	ANAHEIM CA	13.12 CITY, ST, ZIP	
12.13 NAME	ST TALICHETT, CECILIA	13.13 NAME	☐ Change ☐ Addition
12.14 STREET ADDRESS	4155 E LA PALMA AVE #250	13.14 STREET ADDRESS	
12.15 CITY, ST, ZIP	ANAHEIM CA	13.15 CITY, ST, ZIP	
12.16 NAME		13.16 NAME	☐ Change ☐ Addition
12.17 STREET ADDRESS		13.17 STREET ADDRESS	
12.18 CITY, ST, ZIP		13.18 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.04(1)(b), Florida Statutes. I further certify that the information is filed on this annual report or supplemental annual report or 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 of this filing, or on an attachment with an address.

SIGNATURE:

Cecilia Talichet Cecilia Talichet D.P.

4-21-95 714 579 3700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR