

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

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # P93000040402 (8)

1. Corporation Name

ANOUGHKA INVESTMENTS III, INC.

Principal Place of Business

21075 NORTHEAST 34TH AVENUE  
STE. 206  
NORTH MIAMI BEACH FL 33180

Mailing Address

21075 NORTHEAST 34TH AVENUE  
STE. 206  
NORTH MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
06/01/1993

3a. Date of Last Report  
05/01/1994

2. Principal Place of Business

21 1993/ NE 36 PI.

2a. Mailing Address

26 1993/ NE 36 PI.

4. FEI Number  
65-0443792

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

23 City & State

AVENTURA, FLA.

28 City & State

AVENTURA, FLA.

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

24 Zip

33180

25 Country

USA

29 Zip

33180

30 Country

USA

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHIFF, JAMES M  
9130 SOUTH DADELAND BLVD.  
STE. 1609  
MIAMI FL 33150

81 Name  
SAKOWITZ, ALAN  
82 Street Address (P.O. Box Number is Not Acceptable)  
1111 LAKE CONCHESSE  
83 SUITE 401  
84 City  
BAY HARBOR ISLAND, FL 85 Zip Code  
33154

11. Pursuant to the provisions of Sections 607.0502 and 607.1408, 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 the filer, if applicable.

(NOTE: Registered Agent signature required when reappointing)

4/6/95

12. OFFICERS AND DIRECTORS

| TITLE | NAME            | STREET ADDRESS         | CITY - ST - ZIP |
|-------|-----------------|------------------------|-----------------|
| D     | ANOUGHKA, EGOZI | 21075 NE 34TH AVE #206 | N. MIAMI BCH FL |
|       |                 |                        |                 |
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|       |                 |                        |                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME            | STREET ADDRESS  | CITY - ST - ZIP      |
|-------|-----------------|-----------------|----------------------|
| D     | ANOUGHKA, EGOZI | 1993/ NE 36 PI. | AVENTURA, FLA. 33180 |
|       |                 |                 |                      |
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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:

*Alan Sakowitz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number