

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 198645

(4)

1. Corporation Name

BUNING INTERNATIONAL INC.

Principal Place of Business

Mailing Address

3060 W. COMMERCIAL BLVD.
P.O. BOX 491950
FT LAUDERDALE FL 33349

3060 W. COMMERCIAL BLVD.
P.O. BOX 491950
FT LAUDERDALE FL 33349

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1956

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1365901

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

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

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STONE, ARTHUR O.
3060 W.COMMERCIAL BLVD.
FT LAUDERDALE FL 33309

81 Name

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

83

84 City

FL

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

Signature: Typed or printed name of registered agent and that of applicant

(NOT Required Agent signature required when consolidating)

Date

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BLACKWELL, JAMES
STREET ADDRESS	1741 SW 50 AVE.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	DVP
NAME	ALTMANN, PAUL J.
STREET ADDRESS	8814 C-9W 22 ST
CITY - ST - ZIP	BOCA RATON FL
TITLE	DP
NAME	STONE, ARTHUR O
STREET ADDRESS	60 ISLA BAHIA DR.
CITY - ST - ZIP	FT LAUDERDALE, FL 00000
TITLE	SD
NAME	STONE, SHIRLEY
STREET ADDRESS	60 ISLA BAHIA DRIVE
CITY - ST - ZIP	FT LAUDERDALE, FL 00000
TITLE	D
NAME	GORDON, SERGIA
STREET ADDRESS	3100 NW 72 AVE #120
CITY - ST - ZIP	MIAMI FL
TITLE	D
NAME	OLAND, RICHARD
STREET ADDRESS	6421 CONGRESS AVE. #204
CITY - ST - ZIP	BOCA RATON FL

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	V/P/D	☐ Change ☒ Addition
12 NAME	DEMAREST, RICHARD	
13 STREET ADDRESS	1759 NE 21 ST.	
14 CITY - ST - ZIP	FT LAUDERDALE FL	
21 TITLE	D	☐ Change ☒ Addition
22 NAME	BENNETT, BONNIE STONE	
23 STREET ADDRESS	1000 SE 7 ST	
24 CITY - ST - ZIP	FT LAUDERDALE FL 33301	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☒ Change ☐ Addition
52 NAME	GORDON, SERGIO	
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

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 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 this 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 report or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Signature of Agent