

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

DOCUMENT # **254637** (2)

1. Corporation Name

**HENRY END'S INTERNATIONAL DESIGN, INC.**

'95 MAR -3 AM 8:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

**2000 TOWERSIDE TERRACE  
APT. 2107  
MIAMI FL 33138**

Mailing Address

**2000 TOWERSIDE TERR.  
T57  
MIAMI FL 33138  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**01/04/1962**

3a. Date of Last Report

**04/06/1994**

4. FEI Number

**59-0950097**

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

**END, HENRY  
2000 TOWERSIDE TERR., APT. 2107  
MIAMI FL 33138**

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

(Type name of registered agent and the name of the corporation)

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

|                 |                                  |
|-----------------|----------------------------------|
| TITLE           | <b>P</b>                         |
| NAME            | <b>END, HENRY</b>                |
| STREET ADDRESS  | <b>2000 TOWERSIDE TERR.</b>      |
| CITY - ST - ZIP | <b>MIAMI FL</b>                  |
| TITLE           | <b>VP</b>                        |
| NAME            | <b>END, JESSIE</b>               |
| STREET ADDRESS  | <b>2000 TOWERSIDE TERR.</b>      |
| CITY - ST - ZIP | <b>MIAMI FL</b>                  |
| TITLE           | <b>S</b>                         |
| NAME            | <b>KOCH, JACQUE</b>              |
| STREET ADDRESS  | <b>9910 COLLINS AVE., APT. 4</b> |
| CITY - ST - ZIP | <b>MIAMI BEACH FL</b>            |
| 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           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME            |                                                                   |
| 13 STREET ADDRESS  |                                                                   |
| 14 CITY - ST - ZIP |                                                                   |
| 21 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME            |                                                                   |
| 23 STREET ADDRESS  |                                                                   |
| 24 CITY - ST - ZIP |                                                                   |
| 31 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME            |                                                                   |
| 33 STREET ADDRESS  |                                                                   |
| 34 CITY - ST - ZIP |                                                                   |
| 41 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME            |                                                                   |
| 43 STREET ADDRESS  |                                                                   |
| 44 CITY - ST - ZIP |                                                                   |
| 51 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME            |                                                                   |
| 53 STREET ADDRESS  |                                                                   |
| 54 CITY - ST - ZIP |                                                                   |
| 61 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME            |                                                                   |
| 63 STREET ADDRESS  |                                                                   |
| 64 CITY - ST - ZIP |                                                                   |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information is true and correct 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 executor 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 on an attachment with an address.

SIGNATURE:

(Type name of signing officer or director)

*President 2-90-95*