

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 267434 (9)
1. Corporation Name
ESTREB, INC.

Principal Place of Business Mailing Address
50 WEST FLAGLER STREET 50 WEST FLAGLER STREET
MIAMI FL 33130-1803 MIAMI FL 33130-1803

3. Date Incorporated or Qualified 02/25/1963 3a. Date of Last Report 05/01/1994
4. FEI Number 59-1050628 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. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

ROSENBERG, REBECCA
921 NE 176TH ST
N MIAMI BCH. FL 33162

10. Name and Address of New Registered Agent

81 Name REBECCA BABOURI ROSENBERG
82 Street Address (P.O. Box Number is Not Acceptable) 921 NE 176 STREET
83
84 City N. MIAMI BEACH, FL 85 Zip Code 33162

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 of application

DATE Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE TSD
NAME ROSENBERG, REBECCA
STREET ADDRESS 921 NE 176TH ST
CITY - ST - ZIP NORTH MIAMI BCH. FL
TITLE D
NAME BABOURI, SARAH
STREET ADDRESS 921 NE 176 ST
CITY - ST - ZIP N. MIAMI BCH FL
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE REBECCA BABOURI ROSENBERG ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 921 NE 176 ST
1.4 CITY - ST - ZIP N. MIAMI BEACH, FLA 33162
2.1 TITLE VICE President ☐ Change ☐ Addition
2.2 NAME SARAH BABOURI BABOURI
2.3 STREET ADDRESS 921 NE 176 ST
2.4 CITY - ST - ZIP N. MIAMI BEACH, FLA 33162
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REBECCA BABOURI ROSENBERG

4/25/95

305-271-8844