

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 298251

(0)

1. Corporation Name

ED MITCHELL INCORPORATED

Principal Place of Business

**17880 SW 232 STREET
MIAMI FL 33170
US**

Mailing Address

**6731 S.W. 138 STREET
MIAMI FL 33158**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/29/1965

3a. Date of Last Report

04/21/1994

4. FEI Number

59-1425028

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MITCHELL, FRANK C.
6731 S.W. 138 STREET
MIAMI 33158**

10. Name and Address of New Registered Agent

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 title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	TD
NAME	MITCHELL, HELEN
STREET ADDRESS	27055 SW 157TH AVE
CITY - ST - ZIP	NARANJA FL
TITLE	PD
NAME	MITCHELL, FRANK C
STREET ADDRESS	6731 SW 138 ST.
CITY - ST - ZIP	MIAMI, FL 00000
TITLE	VP
NAME	MITCHELL, EDWARD T.
STREET ADDRESS	13283 SW 255 TERR
CITY - ST - ZIP	NARANJA FL
TITLE	D
NAME	MITCHELL, JOHN K
STREET ADDRESS	18200 SW 192 ST
CITY - ST - ZIP	MIAMI, FL 00000
TITLE	SD
NAME	MITCHELL, SUSAN E
STREET ADDRESS	6731 S.W. 138 ST.
CITY - ST - ZIP	MIAMI, FL 00000
TITLE	D
NAME	PIERCE, MARJORIE M
STREET ADDRESS	18955 S.W. 284 ST.
CITY - ST - ZIP	HOMESTEAD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	☐ Change ☐ Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	☐ Change ☐ Addition
31 TITLE	VPD ☒ 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	S ☒ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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)(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 the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan E. Mitchell, Secretary

Susan E. Mitchell

4-27-95(305) 233-8187

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

DATE

Telephone Number