

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 28 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 317075 (0)

1. Corporation Name

SANS SOUCI CONSTRUCTION CO INC

Principal Place of Business

1701 BISCAYNE BLVD
SUITE 214
N MIAMI BCH FL 33160-2588

Mailing Address

17971 BISCAYNE BLVD
SUITE 214
N MIAMI BCH FL 33160-2588

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/23/1967

3a. Date of Last Report
03/29/1994

4. FEI Number
59-1286918

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

21 **2701 LE JEUNE ROAD**

2a. Mailing Address *c/o EDWARD P. SWAN*

26 **2701 LE JEUNE ROAD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **CORAL GABLES, FLORIDA**

City & State

28 **CORAL GABLES, FLORIDA**

Zip

Country

24 **33134**

25 **U.S.A.**

Zip

Country

29 **33134**

30 **U.S.A.**

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 installing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
PT HUTCHINGS, CAROLE SUSAN
STREET ADDRESS
1941 WOLFSNARE RD.
CITY - ST - ZIP
VIRGINIA BEACH VA.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

Change Addition

TITLE

NAME
VS MALNICK, JUDY LATEINER
STREET ADDRESS
2484 FLOPIN CT.
CITY - ST - ZIP
BELLMORE, N.Y.

21 TITLE

22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

Change Addition

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE

32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

Change Addition

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE

42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

Change Addition

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE

52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

Change Addition

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE

62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

Change Addition

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 my address.

SIGNATURE:

Edward P. Swan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EDWARD P. SWAN

4/23/95

305-4435020