

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Martinez
Secretary of State
1000 Bay Street, Suite 1000
Tallahassee, Florida 32301-2000

APPROVED
AND
FILED

9:11 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **351846**

(1)

1. Corporation Name

INACTIVE CORPORATIONS, INC.

Principal Office Address

**% MORRIS J. WATSKY, ESQ.
700 N.W. 107TH AVENUE
MIAMI FL 33172**

Mailing Address

**% MORRIS J. WATSKY, ESQ.
700 N.W. 107TH AVENUE
MIAMI FL 33172**

(Print and write in this space)

3. Date of Incorporation in Florida
09/08/1969

3a. Date of Last Report
05/01/1994

2. Principal Office Address

21

2b. Mailing Address

26

4. FCI Number
59-1275889

Applied For
Not Applicable

State Apt. # etc.

22

State Apt. # etc.

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has notice for intangible tax under Chapter 194 Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**WATSKY, MORRIS J., ESQ.
700 NW 107TH AVENUE
MIAMI FL 33172**

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 607.050 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 licensed with and accept the obligations of Section 607.0508 Florida Statutes.

SIGNATURE

(Print name of registered agent or the corporation)

(Print name of registered agent or the corporation)

(Print name of registered agent or the corporation)

12. OFFICERS AND DIRECTORS

12a

NAME

STREET ADDRESS

CITY & STATE

**PDC
MILLER, LEONARD
700 NW 107TH AVE, 4TH FL
MIAMI FL**

12b

NAME

STREET ADDRESS

CITY & STATE

**VD
BOLOTIN, IRVING
700 NW 107TH AVE, 4TH FL
MIAMI FL**

12c

NAME

STREET ADDRESS

CITY & STATE

**T
SALEDA, M.E.
700 NW 107TH AVE, 4TH FL
MIAMI FL**

12d

NAME

STREET ADDRESS

CITY & STATE

**SD
COLE, ROBERT G.
700 NW 107TH AVE, 4TH FL
MIAMI FL**

12e

NAME

STREET ADDRESS

CITY & STATE

**AS
SIERRA, E. KATHLEEN
700 NW 107TH AVE, 4TH FL
MIAMI FL**

12f

NAME

STREET ADDRESS

CITY & STATE

**D
MILLER, LEONARD
700 N.W. 107TH AVENUE
MIAMI FL**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1.

13a

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

13b

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

13c

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

13d

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

13e

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

13f

NAME

STREET ADDRESS

CITY & STATE

☐ Change ☐ Addition

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(4)(b) Florida Statutes. I further certify that the information indicated on this annual report or annual report or 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 registered agent of the corporation as required by Chapter 199 Florida Statutes and that my name appears in Block 12 of this filing. I hereby certify and accept the obligations of Chapter 199 Florida Statutes and that my name appears in Block 12 of this filing.

SIGNATURE:

Kathleen E. Sierra Kathleen E. Sierra

4/17/95

(905) 229-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR