FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

FILED
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 357053 (8)

1. Corporation Name
SAPOL ENTERPRISES INC

Principal Place of Business	Mailing Address
P O BOX 29 3199 S OCEAN DR HALLANDALE FL 33009	P O BOX 29 3199 S OCEAN DR HALLANDALE FL 33009

Merged

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/19/1969	3a. Date of Last Report: 03/15/1994
4. FEI Number: 59-1318234	☐ 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
21 114 Kensington RD
22 Suite, Apt. #, etc.
23 Hollywood FL
24 Zip 33021 25 Country

2a. Mailing Address
26 114 Kensington RD
27 Suite, Apt. #, etc.
28 City & State: Hollywood FL
29 Zip 33021 30 Country

9. Name and Address of Current Registered Agent

SACK, GARY B. ESQ.
1414 CORAL WAY
MIAMI FL

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: R. Claire Jacobs — DATE: 2/28/95

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: DS NAME: JACOBS, CLAIRE STREET ADDRESS: 3199 S OCEAN DR CITY-ST-ZIP: HALLANDALE, FL 00000	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE: NAME: JACOBS CLAIRE STREET ADDRESS: 114 Kensington RD CITY-ST-ZIP: Hollywood FL 33021	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 hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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: R. Claire Jacobs — 2/28/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — DATE

0422341 FP