

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

01/18/1995 11:08:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **394252**

(1)

1. Corporation Name

BOATMEN'S INDUSTRIES, INC.

Principal Place of Business

Mailing Address

**3660 N.W. 41ST STREET
MIAMI FL 33142**

**3660 N.W. 41ST STREET
MIAMI FL 33142**

3. Date Incorporated or Qualified

01/18/1972

3a. Date of Last Report

07/14/1994

4. FBI Number

59-1433059

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. 198.032,
Florida Statutes. Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt #, etc.

State, Apt #, etc.

22

27

City & State

City & State

23

28

Zip

Country

29

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FERNANDEZ, EMELINA
1197 SW 133 PL
MIAMI FL 33142**

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 607.0901 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 607.0905, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

**P
MORALES, RAMON
218 N.W. S. RIVIERA DR.
MIAMI FL 33128**

1. TITLE
1. NAME
1. STREET ADDRESS
1. CITY, ST, ZIP

Change Addition

2. TITLE
2. NAME
2. STREET ADDRESS
2. CITY, ST, ZIP

Change Addition

3. TITLE
3. NAME
3. STREET ADDRESS
3. CITY, ST, ZIP

Change Addition

4. TITLE
4. NAME
4. STREET ADDRESS
4. CITY, ST, ZIP

Change Addition

5. TITLE
5. NAME
5. STREET ADDRESS
5. CITY, ST, ZIP

Change Addition

6. TITLE
6. NAME
6. STREET ADDRESS
6. CITY, ST, ZIP

Change Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.03(2)(b), Florida Statutes. Further, I certify that the information included on this annual report or supplemental annual report is true and correct 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 227, Florida Statutes, and that my name appears in the F-1 or F-1.1 of a newspaper of general circulation with an address.

SIGNATURE: *Emelina Fernandez*
SIGNATURE AND TYPE OR PRINTED NAME OF OFFICER OR DIRECTOR

4/29/95

305-655-7811