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95 APR 17 PM 1:53

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 402842 (9)

**1. Corporation Name
YALE MOSK & CO.**

**Principal Place of Business
9500 S. DADELAND BLVD
STE 606
MIAMI FL 33156
US**

**Mailing Address
10875 S.W. 69 COURT
MIAMI FL 33156
US**

DO NOT WRITE IN THIS SPACE.

**2. Principal Place of Business 2a. Mailing Address
21 9500 S. Dadeland Blvd 26 10875 S.W. 69 Court**

**Suite, Apt. #, etc. Suite, Apt. #, etc.
22 606 27**

**City & State City & State
23 Miami, Fla. 28 Miami, Fla.**

**Zip Country Zip Country
24 33156 25 USA 29 33156 30 USA**

**3. Date Incorporated or Qualified 3a. Date of Last Report
06/09/1972 04/12/1994**

**4. FBI Number Applied For
59-1412927 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. 190.092,
Florida Statutes ☒ Yes ☐ No**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOSK, YALE
10875 SW 69 COURT
MIAMI FL 33156**

**01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 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 *Yale Mosk*
Signature, typed or printed name of registered agent and title, if applicable**

**Yale Mosk, President
(NOTE: Registered Agent signature required when constituting)**

**April 11, 1995
DATE**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE PD
NAME MOSK, YALE
STREET ADDRESS 10875 SW 69 COURT
CITY - ST - ZIP MIAMI FL**

**1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP**

**TITLE VSD
NAME MOSK, SHARON
STREET ADDRESS 10875 SW 69 COURT
CITY - ST - ZIP MIAMI FL**

**2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP**

**TITLE AVD
NAME MOSK, MATTHEW
STREET ADDRESS 10875 S.W. 69 CT.
CITY - ST - ZIP MIAMI FL**

**3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP**

**TITLE AVD
NAME MOSK, LAURI
STREET ADDRESS 10875 S.W. 69 CT.
CITY - ST - ZIP MIAMI FL**

**4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 119.07(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 an address.

**SIGNATURE: *Yale Mosk*
Signature and typed or printed name of signing officer or director**

**4/11/95 305-670-1154
Date Expiration Number**