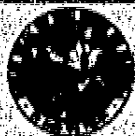


FILE NOW: FILING FEE AFTER MAY 1 IS \$

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT
Sandra B. Mc
Secretary of
DIVISION OF CORP

APPROVED
AND
FILED

95 APR 19 PM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 405576

(0)

1. Corporation Name

DRYER ENTERPRISES, INCORPORATED

Principal Place of Business

102 SOUTH KROME AVENUE
HOMESTEAD FL 33030
US

Mailing Address

20975 SW 264 ST.
MIAMI FL 33031

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/25/1972

3a. Date of Last Report

08/17/1994

4. FEI Number

50-1085070

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DRYER, DAVID, B
20975 S.W. 264TH ST
SUITE 63
HOMESTEAD FL 33031

81 Name

DRYER, DAVID, B

82 Street Address (P.O. Box Number is Not Acceptable)

83

20975 S.W. 264TH STREET

84 City

HOMESTEAD

FL

85 Zip Code
33031

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 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 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when re-stating)

DATE

April 13, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

DRYER, DAVID

STREET ADDRESS

20975 S.W. 264 ST

CITY - ST - ZIP

HOMESTEAD FL

TITLE

V

NAME

DRYER, SUSAN

STREET ADDRESS

29400 S.W. 179TH AVENUE

CITY - ST - ZIP

HOMESTEAD FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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☐ 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 an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 13, 1995 245 4149