

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 441132 (8)

1. Corporation Name
REIMAR, INC.



Principal Place of Business
302 N. FEDERAL HWY.
DANIA FL 33004

Mailing Address
302 N. FEDERAL HWY.
DANIA FL 33004

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

RICHARDS, REILLY
1400 S.W. 27 TERRACE
FT. LAUDERDALE FL 33312

3. Date Incorporated or Qualified
12/03/1973

3a. Date of Last Report
05/01/1995

4. FEI Number
59-1520209

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

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

Signature typed or printed name of registered agent and the day and date.

(If the Registered Agent's Signature is required, then the following.)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE
NAME RICHARDS, REILLY
STREET ADDRESS 1400 S.W. 27TH TERR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE
NAME RICHARDS, MARY P
STREET ADDRESS 1100 SW 12 ST. #215
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE
NAME RICHARDS, REILLY
STREET ADDRESS 1400 S.W. 27TH TERR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE V ☐ DELETE
NAME RICHARDS, MARY P.
STREET ADDRESS 1100 SW 12 ST. #215
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-13-96 954-922-2377

Date

Daytime Phone #

CR2E034 (12/95)