

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra S. Matheson Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 448236 (O)

1. Corporation Name
DAVID AVIDAN, INC.

Principal Place of Business 36 NORTHEAST 1ST STREET 1009 SEYBOLD BUILDING MIAMI FL 33132	Mailing Address 36 NORTHEAST 1ST STREET 1009 SEYBOLD BUILDING MIAMI FL 33132
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2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/24/1974	3a. Date of Last Report 03/21/1994
4. FEI Number 59-1523349	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
6. This corporation has liability for a corporate tax under S. 169.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

**AVIDAN, DAVID
36 NORTHEAST FIRST ST., 1009 SEYBOLD BLDG.
MIAMI FL 33132**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0542 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME PD AVIDAN, DAVID	1. TITLE 36 N.E. 1ST STREET MIAMI FL	1. NAME	☐ Change ☐ Addition
2. NAME	2. TITLE	2. NAME	☐ Change ☐ Addition
3. NAME	3. TITLE	3. NAME	☐ Change ☐ Addition
4. NAME	4. TITLE	4. NAME	☐ Change ☐ Addition
5. NAME	5. TITLE	5. NAME	☐ Change ☐ Addition
6. NAME	6. TITLE	6. NAME	☐ Change ☐ Addition
7. NAME	7. TITLE	7. NAME	☐ Change ☐ Addition
8. NAME	8. TITLE	8. NAME	☐ Change ☐ Addition
9. NAME	9. TITLE	9. NAME	☐ Change ☐ Addition
10. NAME	10. TITLE	10. NAME	☐ Change ☐ Addition
11. NAME	11. TITLE	11. NAME	☐ Change ☐ Addition
12. NAME	12. TITLE	12. NAME	☐ Change ☐ Addition
13. NAME	13. TITLE	13. NAME	☐ Change ☐ Addition
14. NAME	14. TITLE	14. NAME	☐ Change ☐ Addition
15. NAME	15. TITLE	15. NAME	☐ Change ☐ Addition
16. NAME	16. TITLE	16. NAME	☐ Change ☐ Addition
17. NAME	17. TITLE	17. NAME	☐ Change ☐ Addition
18. NAME	18. TITLE	18. NAME	☐ Change ☐ Addition
19. NAME	19. TITLE	19. NAME	☐ Change ☐ Addition
20. NAME	20. TITLE	20. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished, true and correct, and qualify for the exemption stated in Section 339.02(4)(b), Chapter 339, Florida Statutes. I further certify that the information indicated as this annual report or supplemental annual report is true and correct, and that my signature shall have the same legal effect as it may or may not have that I am an officer or director of the corporation or the treasurer or holder 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 added as attachment with an address.

SIGNATURE:  **David Avidan** 4-28-95 (3-5) 379-5959