

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 453490

(5)

95 JUN 19 PM 12: 20

1. Corporation Name

CHEETAH III, INC.

Principal Place of Business

497 NW 31ST AVE
POMPAHO BEACH FL 33069

Mailing Address

497 NW 31ST AVE
POMPAHO BEACH FL 33069

4698 Foxview Place
Lake Worth, FL 33467

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/23/1974

3a. Date of Last Report

02/17/1994

4. FEI Number

59-1549753

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

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

DEFOOR, MARK

497 NW 31ST AVE 4698 Foxview Place
POMPAHO BEACH FL 33069 Lake Worth, FL 33467

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

Lucy M. DeFoor

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DEFOOR, MARK
STREET ADDRESS	4698 FOXVIEW PL
CITY - ST - ZIP	LAKEWORTH FL
TITLE	VP
NAME	DEFOOR, LUCY
STREET ADDRESS	4698 FOXVIEW PLACE
CITY - ST - ZIP	LAKE WORTH FL
TITLE	S/T
NAME	DEFOOR, LUCY
STREET ADDRESS	4698 FOXVIEW PLACE
CITY - ST - ZIP	LAKE WORTH FL
TITLE	VP
NAME	GREGORY, JANET
STREET ADDRESS	1020 10TH LANE
CITY - ST - ZIP	LAKE WORTH FL
TITLE	T
NAME	ADAMS, WILLIAM A
STREET ADDRESS	10100 PINE BOROUGH LANE
CITY - ST - ZIP	PALM BEACH GARDENS FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lucy M. DeFoor
Lucy M. DeFoor

6/7/95

462-433-3984