

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 25 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 464197 (3)

1. Corporation Name

GENERAL AWARDS, INC.

Principal Place of Business

7715 NW 64 ST
MIAMI FL 33166

Mailing Address

7715 NW 64 ST
MIAMI FL 33166

3. Date Incorporated or Qualified
10/28/1974

3a. Date of Last Report
04/25/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1662523

Applied For
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23. Zip

Country

28. Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~WAAS, GEORGE J.~~
~~7715 NW 64 ST~~
~~MIAMI FL 33166~~

81. Name
MANUEL J. SEDANO
82. Street Address (P.O. Box Number is Not Acceptable)
11200 N.W. 60TH CT.
83.
84. City
HIALEAH
85. Zip Code
FL 33012

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 MANUEL J. SEDANO

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reconstituting)

4/19/95
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	WAAS, GEORGE J.
STREET ADDRESS	4952 S.W. 101 AVE.
CITY - ST - ZIP	COOPER CITY FL
TITLE	VP
NAME	SEDANO, MANUEL J.
STREET ADDRESS	11200 N.W. 60TH COURT
CITY - ST - ZIP	HIALEAH FL
TITLE	SDI
NAME	WAAS, RHODA J.
STREET ADDRESS	4952 S.W. 101ST AVE.
CITY - ST - ZIP	COOPER CITY FL
TITLE	EV
NAME	WAAS, CYNTHIA
STREET ADDRESS	11 INDUSTRIAL DRIVE
CITY - ST - ZIP	FLORIDA NY 10021
TITLE	V
NAME	RUSSIAN, NICHOLAS
STREET ADDRESS	11 INDUSTRIAL DRIVE
CITY - ST - ZIP	FLORIDA NY 10021
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	DECEASED
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	P.O. Box 394
4.4 CITY - ST - ZIP	SUGAR LOAF, N.Y. 10981
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	PO Box 394
5.4 CITY - ST - ZIP	SUGAR LOAF, NY 10981
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 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: MANUEL J. SEDANO

SIGNATURE AND PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Signature (Print Name)