

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
REDACTED NUMBER
REDACTED NUMBER
REDACTED NUMBER

APPROVED
AND
FILED

95 MAY -1 7 31 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **465053**

(7)

FEDERATED PURCHASING CORP.

1301 99TH STREET
BAY HARBOR ISLANDS FL 33154

1301 99TH STREET
BAY HARBOR ISLANDS FL 33154

DOCUMENT WITH THE CORP. NAME

| | | | |
|--------------------------|-------------------------|---|--------------------------------|
| 1. Date of Incorporation | 2a. Mailed and Received | 3. Date of Incorporation | 3a. Date of Filing |
| 21 | 26 | 11/15/1974 | 04/28/1994 |
| 2. Date of Report | 2b. Mailed and Received | 4. Filing Number | Appoint Fee |
| 22 | 27 | 59-1559358 | Not Applicable |
| 23 | 28 | 5. Certificate of Status Fee | \$8.75 Additional Fee Required |
| 24 | 29 | 6. Election of Corporate Officers and Directors Fee | \$5.00 May Be Added to Fees |
| 25 | 30 | 7. This corporation has elected to be taxed as a corporation <input checked="" type="checkbox"/> or as a partnership <input type="checkbox"/> | |

9. Name and Address of Current Registered Agent

SMITH, D. DONALD
1301 99TH STREET
BAY HARBOR ISLANDS FL 33140

10. Name and Address of New Registered Agent

| | |
|--------------------|-------------|
| 01. Name | 05. State |
| 02. Street Address | 06. Zip |
| 03. City | 07. County |
| 04. State | 08. Country |

FL 05

11. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida and a resident of the County of ...

12. \$
SMITH, NAOMI R.
1301 99TH STREET
BAY HARBOR ISLANDS FL
PD
SMITH, D DONALD
1301 99TH STREET
BAY HARBOR ISLANDS FL

| | |
|---------------|-----------|
| 13. Authority | Authority |
| 14. Authority | Authority |
| 15. Authority | Authority |
| 16. Authority | Authority |
| 17. Authority | Authority |
| 18. Authority | Authority |
| 19. Authority | Authority |
| 20. Authority | Authority |
| 21. Authority | Authority |
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| 24. Authority | Authority |
| 25. Authority | Authority |
| 26. Authority | Authority |
| 27. Authority | Authority |
| 28. Authority | Authority |
| 29. Authority | Authority |
| 30. Authority | Authority |

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida and a resident of the County of ...
SIGNATURE: *D. Donald Smith* D. DONALD SMITH, PRES
INITIALS AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-95 (305)865-5466