

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Randall B. Martin  
Secretary of State  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

JULY 1 PM 1:00

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 556130

(3)

1. Corporation Name:

MILITARY ASSISTANCE CORP.

Principal Place of Business	Mailbox Address
9000 SW 87 CT 103 MIAMI FL 33176 US	9000 SW 87 CT 103 MIAMI FL 33176 US
2. Primary Place of Business	28. Mailing Address
21 P.O. Box 335	26 P.O. Box 335
Route, Apt. # etc.	Route, Apt. # etc.
22 City & State	27 City & State
23 CEDAR KEY FL	28 CEDAR KEY FL
Ap. Country	City Country
24 32605 USA	25 29 30 USA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
12/20/1977	05/09/1994
4. EIN Number	Applied For <input checked="" type="checkbox"/> Not Applicable
59-1787729	
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Finance Type/Type Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under § 199(1)(C) Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

KASS, MORTIMER H  
9000 SW 87 CT  
103  
MIAMI FL 33176

10. Name and Address of New Registered Agent

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

FL

11. Pursuant to the provisions of Sections 601, 602, and 603, 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. No 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 the Florida laws of Financial Institutions.

Part II: OFFICERS

12. Position	13. Address	14. Title	15. Address	16. Title
PST NUMRICH, FRANCES A. 2323 HURLEY MNT ROAD KINGSTON NY	1. NAME FRANCES A NUMRICH 2323 HURLEY MOUNTAIN ROAD KINGSTON NY 12401	SECRETARY/TREASURER FRANCES A NUMRICH 2323 HURLEY MOUNTAIN ROAD KINGSTON NY 12401	1. NAME GEORGE R NUMRICH III P.O. BOX 335 N.Y.	PRESIDENT GEORGE R NUMRICH III P.O. BOX 335 N.Y.
NAME TITLE ADDRESS	2. NAME TITLE ADDRESS	2. NAME TITLE ADDRESS	2. NAME TITLE ADDRESS	2. NAME TITLE ADDRESS
NAME TITLE ADDRESS	3. NAME TITLE ADDRESS	3. NAME TITLE ADDRESS	3. NAME TITLE ADDRESS	3. NAME TITLE ADDRESS
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NAME TITLE ADDRESS	7. NAME TITLE ADDRESS	7. NAME TITLE ADDRESS	7. NAME TITLE ADDRESS	7. NAME TITLE ADDRESS

14. I declare, certify that the information supplied with this document is true, accurate, and complete, and that the signature which bears the name supplied has been made under oath that it is an offer or part of the consideration in the making of a contract to execute the report as requested by Chapter 603, Florida Statutes, and that my name appears in Block A or Block C of the record or an attachment thereto.

SIGNATURE:

DIGITAL SIGNATURE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

5/1/95

909/543-6426