

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

CORPORATION ANNUAL REPORT 1995				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 566228 (3)					
1. Corporation Name STEDEB PROPERTIES, INC.					

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -9 PM 4: 20

Principal Place of Business		Mailing Address	
45-A STRATFORD WEST BOYNTON BEACH FL 33436		45-A STRATFORD WEST BOYNTON BEACH FL 33436	

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
25 Country	30 Country

DO NOT WRITE IN THIS SPACE.

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FISHER, HY 45-A STRATFORD WEST BOYNTON BEACH FL 33436		81 Name STEVE POLATNICK 82 Street Address (P.O. Box Number is Not Acceptable) 10691 KENDALL DRIVE 83 SUITE 101 84 City MIAMI FL 85 Zip Code 33176	

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 STEVE POLATNICK Steve Polatnick DATE _____
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☒ Change ☐ Addition
NAME	FISHER, HY	1.2 NAME	REMOVE HY FISHER
STREET ADDRESS	UNITE 45-A STRATFORD W.	1.3 STREET ADDRESS	AS OFFICER & DIRECTOR
CITY - ST - ZIP	BOYNTON BEACH FL	1.4 CITY - ST - ZIP	
TITLE	S	2.1 TITLE	☒ Change ☐ Addition
NAME	FISHER, STEPHEN	2.2 NAME	P.S. FISHER, STEPHEN
STREET ADDRESS	2033 VENDOME	2.3 STREET ADDRESS	SAME
CITY - ST - ZIP	MONTREAL, QUEBEC	2.4 CITY - ST - ZIP	SAME
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	FISHER, DEBRA	3.2 NAME	
STREET ADDRESS	3450 DRUMMOND #1817	3.3 STREET ADDRESS	
CITY - ST - ZIP	MONTREAL, QUEBEC	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 119.07(3)(b), 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 even in attachment with an address.

SIGNATURE: S. Fisher STEPHEN FISHER FEB 15 1995 514 342 7174
(Signature and typed or printed name of signing officer or director)