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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tahara B. McPherson
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 AM 8:39

DOCUMENT # 569613 (3)

1. Corporation Name

VENTURE OPPORTUNITIES CORPORATION

Principal Place of Business

410 5TH ST 29TH FLOOR
NEW YORK NY 10022

Mailing Address

410 5TH ST 29TH FLOOR
NEW YORK NY 10022

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1978

3b. Date of Last Report

01/28/1994

2. Principal Place of Business

21 150 E. 58th Street

Suite, Apt. #, etc.

22 16th Floor

City & State

23 New York, NY

Zip

24 10155

Country

25 USA

2a. Mailing Address

26 150 E. 58th Street

Suite, Apt. #, etc.

27 16th Floor

City & State

28 New York, NY

Zip

29 10155

Country

30 USA

4. FEI Number

59-1882664

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DADY, ROBERT E
4000 INTERNATIONAL PLACE
100 S.E. SECOND STREET
MIAMI FL 33131

10. Name and Address of Now 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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MARCH, A. FRED
STREET ADDRESS 410 5TH ST 29TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE VTD
NAME MARCH, FLORA
STREET ADDRESS 410 5TH ST 29TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE SD
NAME DADY, ROBERT E.
STREET ADDRESS 100 S.E. SECOND STREET
CITY-ST-ZIP MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

150 E. 58th Street, 16th Fl.
New York, NY 10155

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

150 E. 58th Street, 16th Fl.
New York, NY 10155

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

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(4)(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 registered agent or transfer agent or underwriter or issuer of the securities of the corporation; and that my name appears in Block 12 or Block 13 of this report, or on an addendum filed with this report as required by Chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

A. FRED MARCH

1/11/95

(212) 832-3737

(15/95)

(Signature Printed Name)