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CORPORATION
ANNUAL REPORT
1995



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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 17 PM 3:17

DOCUMENT # 578968

(0)

1. Corporation Name

INNISFREE, INC.

Principal Place of Business

6955 N.W. 36TH AVENUE
MIAMI FL 33147

Mailing Address

6955 N.W. 36TH AVENUE
MIAMI FL 33147

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
07/25/1978

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

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number
59-1840140

Applied For

Not Applicable

Suite, Apt. #, etc.

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

28

Zip

Country

Zip

Country

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

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUBEL, JANICE B.
6955 N.W. 36TH AVENUE
MIAMI FL 33147

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

(Type name, typed or printed name of registered agent and fee if applicable)

(Type name, typed or printed name of registered agent and fee if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

RUBEL, JANICE B.

STREET ADDRESS

6955 N.W. 36TH AVENUE

CITY - ST - ZIP

MIAMI FL 33147

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

VP

NAME

RUBEL, THEODORE

STREET ADDRESS

6955 N.W. 36 AVE.

CITY - ST - ZIP

MIAMI FL 33147

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

S

NAME

CASTILLO, SANDRA

STREET ADDRESS

6955 NW. 36 AVE.

CITY - ST - ZIP

MIAMI FL 33147

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement and report is true and accurately 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 true and accurate copy of the information to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or on an attached sheet as an officer or director.

SIGNATURE:

Janice B. Rubel

JANICE B. RUBEL, PRESIDENT

2/10/95

(Type name, typed or printed name of signing officer or director)

Date

(Type name, typed or printed name of signing officer or director)