

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
Office of Corporations and Charities

APPROVED
AND
FILED

95 MAY 1 11 3:57

DOCUMENT # 588781 (5)

1. Corporation Name
C.G.N.Y., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 9633 VIA EMILIE
BOCA RATON FL 33428
US

Mailing Address: 9633 VIA EMILIE
BOCA RATON FL 33428
US

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 10/06/1978	3a. Date of Last Report 05/01/1994
4. FEI Number 59-1855859	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$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. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21. State: Fla. # etc.	2a. Mailing Address 25. State: Fla. # etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Locality	29. Locality
30. Locality	30. Locality

9. Name and Address of Current Registered Agent GENTILE, CIRO 9633 VIA EMILIE BOCA RATON FL 33428		10. Name and Address of New Registered Agent 81. Name: ROBERT E. BOUTWELL, ESQ. 82. Street Address (P.O. Box Number is Not Acceptable) 411 E. Hillsboro Blvd. 83. City: Deerfield Beach 84. State: FL 85. Zip Code: 33441	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for both of 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 607.0504, Florida Statutes.

SIGNATURE

[Signature]

4-27-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGE S. TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, STATE, ZIP	PD GENTILE, CIRO 9633 VIA EMILIE BOCA RATON FL	TITLE NAME STREET ADDRESS CITY, STATE, ZIP	President Jose R. Pestana 410 N. Federal Hwy. Pompano Beach, Florida
TITLE NAME STREET ADDRESS CITY, STATE, ZIP		TITLE NAME STREET ADDRESS CITY, STATE, ZIP	Secretary Marina Pestana 410 N. Federal Hwy. Pompano Beach, Florida
TITLE NAME STREET ADDRESS CITY, STATE, ZIP		TITLE NAME STREET ADDRESS CITY, STATE, ZIP	
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TITLE NAME STREET ADDRESS CITY, STATE, ZIP		TITLE NAME STREET ADDRESS CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied was true, being personally furnished and checked as required, for the corporation stated in line item 11. I further certify that the information was obtained from the corporation and not from a third party and that the corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation at the time of filing this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an officer or director of the corporation.

SIGNATURE: *[Signature]* 4/27/95
SIGNED AND TYPED ON PRINTED NAME OF BOARD OFFICER OR DIRECTOR
Ciro-Gentile, Pres. Jose R. Pestana, Pres.