

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 16 PM 2: 58

DOCUMENT # 659510

(2)

1. Corporation Name

CLEARWATER ENTERPRISES, INC.

Principal Place of Business

C/O BERNARD FOURCADE
7915 HARDING AVENUE
24AMI BEACH FL 33141

Mailing Address

C/O BERNARD FOURCADE
7915 HARDING AVENUE
24AMI BEACH FL 33141

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/17/1980

3a. Date of Last Report

02/03/1994

4. FBI Number

59-2261816

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

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAHN, DONALD J.
627-71ST STREET
MIAMI BEACH FL 33141

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 reinstating)

DATE:

12

OFFICERS AND DIRECTORS

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

SD
FOURCADE, BERNARD
7915 HARDING AVE
MIAMI BEACH FL

1.1 TITLE

☐ Change ☐ Addition

NAME

1.2 NAME

STREET ADDRESS

1.3 STREET ADDRESS

CITY - ST - ZIP

1.4 CITY - ST - ZIP

TITLE

PD
FOURCADE, JOHN
9289 CARLYLE AVE
SURFSIDE FL

2.1 TITLE

☐ Change ☐ Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY - ST - ZIP

2.4 CITY - ST - ZIP

TITLE

3.1 TITLE

☐ Change ☐ Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY - ST - ZIP

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

TITLE

7.1 TITLE

☐ Change ☐ Addition

NAME

7.2 NAME

STREET ADDRESS

7.3 STREET ADDRESS

CITY - ST - ZIP

7.4 CITY - ST - ZIP

TITLE

8.1 TITLE

☐ Change ☐ Addition

NAME

8.2 NAME

STREET ADDRESS

8.3 STREET ADDRESS

CITY - ST - ZIP

8.4 CITY - ST - ZIP

TITLE

9.1 TITLE

☐ Change ☐ Addition

NAME

9.2 NAME

STREET ADDRESS

9.3 STREET ADDRESS

CITY - ST - ZIP

9.4 CITY - ST - ZIP

TITLE

10.1 TITLE

☐ Change ☐ Addition

NAME

10.2 NAME

STREET ADDRESS

10.3 STREET ADDRESS

CITY - ST - ZIP

10.4 CITY - ST - ZIP

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

2/11/95 305861 4357