

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

**APPROVED AND FILED**

95 MAY -1 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION ANNUAL REPORT 1995**

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

**DOCUMENT # 661255 (0)**

1. Corporation Name  
**CPT, INC.**

Principal Place of Business: **P.O. BOX 11759 FT LAUDERDALE FL 33339**

Mailing Address: **P.O. BOX 11759 FT LAUDERDALE FL 33339**

(DO NOT WRITE IN THIS SPACE)

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		04/01/1980	05/01/1994
22		27		4. FEI Number	Applied For
23		28		59-1983048	Not Applicable
24		25		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under Section 196.14, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	


9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>RASPOLICH, LINDA K., ESQ.</b> <b>2021 TYLER ROAD</b> <b>HOLLYWOOD FL 33022</b>				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City			
				FL B5 Zip Code			

11. Pursuant to the provisions of Sections 607.09(2) and 607.12(2), 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 a 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 provisions of Sections 607.09(2) and 607.12(2), Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDRESSES CHANGED TO OFFICERS AND DIRECTORS ONLY	
12.1 NAME	PST PUKIT, CHARLES	13.1 NAME	
12.2 STREET ADDRESS	WATERWAY LANDINGS	13.2 STREET ADDRESS	
12.3 CITY AND STATE	FT. LAUDERDALE FL	13.3 CITY AND STATE	
12.4 NAME	D PUKIT, CHARLES	13.4 NAME	
12.5 STREET ADDRESS	WATERWAY LANDINGS	13.5 STREET ADDRESS	
12.6 CITY AND STATE	FT. LAUDERDALE FL	13.6 CITY AND STATE	
12.7 NAME		13.7 NAME	
12.8 STREET ADDRESS		13.8 STREET ADDRESS	
12.9 CITY AND STATE		13.9 CITY AND STATE	
12.10 NAME		13.10 NAME	
12.11 STREET ADDRESS		13.11 STREET ADDRESS	
12.12 CITY AND STATE		13.12 CITY AND STATE	
12.13 NAME		13.13 NAME	
12.14 STREET ADDRESS		13.14 STREET ADDRESS	
12.15 CITY AND STATE		13.15 CITY AND STATE	

14. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 190.01(1), Florida Statutes. I further certify that the information included 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if it has not been authorized with an addressee.

SIGNATURE:  **C. Pukit** 4/26/95 305-564-1445