FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY 13 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F14459** **(4)**

1. Corporate Name
GARY SIMON, D.D.S., P.A.

Principal Place of Business
1717 N FLAGLER DR
WEST PALM BEACH FL 33407

Mailing Address
1717 N FLAGLER DR
WEST PALM BEACH FL 33407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/12/1981
3a. Date of Last Report: 04/11/1994

4. FEI Number: 59-1474008
Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Fiscal Calendar Year Ending: $5.00 May Be Added to Fees

8. [X]

21 | 26
22 | 27
23 | 28
24 | 25 | 29 | 30

9. Name and Address of Current Registered Agent
SIMON, GARY
1717 N FLAGLER DR
WEST PALM BEACH FL.

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Not Acceptable)
83
84 City: FL 85 Zip Code

11. [illegible]

12.
DP
SIMON, GARY
1717 N FLAGLER DR
W PALM BCH FL

13. [illegible]

14. [illegible]

SIGNATURE: Gary Simon GARY SIMON 5/15/95 407 832 4563
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0246210 CP

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TALLAHASSEE, FLORIDA

DOCUMENT # **F16248** **(9)**

1. Corporate Name
WORLDWIDE INFLATABLES, INC.

Principal Place of Business
2389 S E DIXIE HWY
STUART FL 34996
US

Mailing Address
500 E. BROWARD BLVD., SUITE 1950
FT LAUDERDALE FL 33394

FOR OFFICE USE ONLY

3. Date Incorporated or Qualified: 01/27/1981
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
22
23
24 25

2a. Mailing Address
26
27
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29 30

4. FEI Number: 59-2075201 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Florida Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. The corporation has elected to be governed by Chapter 607 of the Florida Statutes. Yes ☒ No ☐

9. Name and Address of Current Registered Agent
HARDIN, DAVID C.
500 E. BROWARD BLVD., SUITE 1950
FT. LAUDERDALE FL 33394

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Not Acceptable)
83
84 City FL 85 Zip Code

11. Principal Place of Business of the Corporation within the State of Florida. The undersigned hereby certify that the corporation has complied with F.S. 607.0501 relating to the maintenance of a registered office and registered agent within the state of Florida.

12. OFFICERS AND DIRECTORS

D
HASKELL, MARGARET MARY
6057 S E RIVERBOAT DR
STUART FL

PD
HASKELL, MARK P
2389 SE DIXIE HWY
STUART FL

DVT
HASKELL, PATRICIA PETERS
6057 S E RIVERBOAT DR
STUART FL

S
HASKELL, ELIZABETH
6057 S E RIVERBOAT DR
STUART FL

13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS — Delete / Add

14. The undersigned hereby certify that the information contained herein is true and correct, and that the corporation has paid all fees due to the Department of State for the preceding calendar year, and that the corporation is in compliance with the provisions of Chapter 607 of the Florida Statutes. The undersigned further acknowledge that pursuant to Section 817.155, Florida Statutes, it is a felony to file a false report with the State of Florida.

SIGNATURE: MARK P HASKELL 5/11/95 407-283-9990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0241406 CP