

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **F36743** (5)

1. Corporate Name
REMM INVESTMENTS, INC.

MAY 11 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1001 3RD AVE W STE 700 BRADENTON FL 34205 **1001 3RD AVE W STE 700 BRADENTON FL 34205**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21. State Apt # etc 26. State Apt # etc
22. City & State 27. City & State
23. City & State 28. City & State
24. City & State 25. City & State 29. City & State 30. City & State

3. Date Incorporated or Qualified **05/28/1981** 3a. Date of Last Report **03/15/1994**
4. FFI Number **59-2172608** 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 is eligible for extended filing under S. 1004.02 Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**HASKINS, HARRY
1800 SECOND STREET
SUITE 818-819
SARASOTA FL 34236**

10. Name and Address of New Registered Agent
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 807.015(2) and 807.150B, 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 807.015(2), Florida Statutes.

SIGNATURE _____ Title of Registered Agent or Director _____

12. OFFICERS AND DIRECTORS

12.1 NAME	SD MENDELSON, MADELINE
12.2 STREET ADDRESS	5140 MACDONALD AVE, #1101 COTE ST LUC QUE CAN00000
12.3 CITY & STATE	VD MENDELSON, MORTON J
12.4 NAME	5140 MACDONALD AVE, #1101 COTE ST LUC QUE CAN00000
12.5 STREET ADDRESS	PD MENDELSON, EDWARD
12.6 CITY & STATE	5140 MACDONALD AVE, #1101 COTE ST LUC QUE CAN00000
12.7 NAME	VD MENDELSON, ROSLYN
12.8 STREET ADDRESS	5140 MACDONALD AVE, #1101 COTE ST LUC QUE CAN00000
12.9 CITY & STATE	VD SKOBURN, ESTA RENA
12.10 NAME	5140 MACDONALD AVE, #1101 COTE ST LUC QUE CAN00000
12.11 STREET ADDRESS	
12.12 CITY & STATE	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 STREET ADDRESS	
13.3 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4 NAME	
13.5 STREET ADDRESS	
13.6 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.7 NAME	
13.8 STREET ADDRESS	
13.9 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, 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 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 treasurer or trustee or possessor of the record or trustee as required by Chapter 100, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing as an attachment with an address.

SIGNATURE: *E. Mendelson*
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EDWARD MENDELSON

MAY 8, 1995