

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Murdum
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F42382**

(4)

1. Corporation Name

RICHARD A. THORNAL, INC.

APPROVED
AND
FILED

95 MAY -1 PM 2: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**5100 LAGORCE DRIVE
MIAMI BEACH FL 33140**

**5100 LAGORCE DRIVE
MIAMI BEACH FL 33140**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

24

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30

3. Date Incorporated or Qualified

08/26/1981

3a. Date of Last Report

05/26/1994

4. FCI Number

59-2122594

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 changeable fees under S. 199.035,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LAMONT, ROBERT S
3050 BISCAYNE BLVD #610
MIAMI FL 33137**

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 (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 fully aware of the obligations of the registered agent under Section 607.0505, Florida Statutes.

SIGNATURE

Richard A. Thornal

8 April 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PST
2. NAME	THORNAL, RICHARD A
3. STREET ADDRESS	5100 LAGORCE DR
4. CITY, ST, ZIP	MIAMI BCH, FL 0
5. TITLE	D
6. NAME	THORNAL, RICHARD A
7. STREET ADDRESS	5100 LAGORCE DR
8. CITY, ST, ZIP	MIAMI BCH, FL 0
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

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 190.02(1)(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 manager 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 of this report as an officer or director with an address.

SIGNATURE:

Richard A. Thornal
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR