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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:47

DOCUMENT # **F54169** **(0)**

1. Corporation Name
LEWIS & ASSOCIATES DEVELOPMENT CORP.

Principal Place of Business	Mailing Address
2614 N.W. 63RD STREET BOCA RATON FL 33469	2614 N.W. 63RD STREET BOCA RATON FL 33469

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/13/1981
3a. Date of Last Report: 04/15/1994

2. Principal Place of Business
21 3599 NW 61 Circle
22 Suite, Apt. #, etc.
23 City & State: Boca Raton, FL
24 Zip: 33496
25 Country: U.S.A.

2a. Mailing Address
26 3599 NW 61 Circle
27 Suite, Apt. #, etc.
28 City & State: Boca Raton, FL
29 Zip: 33496
30 Country: U.S.A.

4. FEI Number: 59-2138570 ☐ 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

9. Name and Address of Current Registered Agent

LEWIS, RONALD C.
~~3599 NW 61ST CIRCLE~~ 3402 Pinehaven Circle
BOCA RATON FL ~~33496~~ 33431

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 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP	1.1 TITLE	☐ Change ☐ Addition
NAME	STEINBERG, ANDREW	1.2 NAME	
STREET ADDRESS	3140 N. 36TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	
TITLE	DP	2.1 TITLE	☐ Change ☐ Addition
NAME	LEWIS, RONALD C	2.2 NAME	
STREET ADDRESS	3402 PINE HAVEN CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	VDP	3.1 TITLE	☐ Change ☐ Addition
NAME	SEGAL, ROBERTA	3.2 NAME	
STREET ADDRESS	12000 N BAYSHORE DR 401	3.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI FL	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	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 changed, or on an attachment with an address.

SIGNATURE: Ronald C. Lewis Pres. 3/31/95 (401) 994-1402
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0890048 CP