

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 AM 11:59

DOCUMENT # F54660

(8)

1. Corporation Name

J. D. HIMBURG, INC.

Principal Place of Business

9321 S W 63 COURT
MIAMI FL 33156

Mailing Address

9321 S W 63 COURT
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/17/1981

3a. Date of Last Report
04/29/1994

2. Principal Place of Business
21 8531 SW 121 Street
Miami, FL 33156

2a. Mailing Address
25 8531 SW 121 Street
Miami, FL 33156

4. FEI Number
59-2147695

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 USA

29 USA

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHILD, MARVIN
590 ENGLISH AVE
HOMESTEAD, FL
33030

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 607.1608, 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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME HIMBURG, JAMES D
STREET ADDRESS 9321 SW 63RD CT
CITY-ST-ZIP MIAMI, FL 00000

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

8531 SW 121 Street
Miami, FL 33156

☐ Change ☐ Addition

TITLE STD
NAME HIMBURG, SUSAN P
STREET ADDRESS 9321 SW 63RD CT
CITY-ST-ZIP MIAMI, FL 00000

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

8531 SW 121 Street
Miami, FL 33156

☒ Change ☐ Addition

TITLE VPD
NAME HIMBURG, OLIVE L
STREET ADDRESS 18500 SW 134TH AVE
CITY-ST-ZIP MIAMI, FL 00000

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

zip - 33177

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 110.07(3)(k), 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 in an attachment with this address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James D. Himburg

2/9/95 305-238-1118
Date Telephone