

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
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 12:53

DOCUMENT # F88905 (7)
1. Corporation Name AMERICAN CONSERVATION ENTERPRISES, INC. 7985 NW, 174th St., Miami FL 33015
Principal Place of Business 7985 N.W. 174TH STREET HALEAH FL 33015
Mailing Address 7985 N.W. 174TH STREET HALEAH FL 33015 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7985 NW, 174 St., Suite, Apt. #, etc. 22 Miami FL, 33015 City & State 23 Miami FL 33015 Zip Country 24 33015 25 Dade	2a. Mailing Address 26 7985 NW, 174 St., Suite, Apt. #, etc. 27 Miami FL, 33015 City & State 28 Miami FL, 33015 Zip Country 29 33015 30 Dade	3. Date Incorporated or Qualified 06/30/1982	3a. Date of Last Report 01/20/1994	4. FEI Number 59-2204651 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
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9. Name and Address of Current Registered Agent SLAVIN, MARK 1031 N. MIAMI BEACH BLVD N. MIAMI BEACH FL 33013	10. Name and Address of New Registered Agent 81 Name Mark Slavin 82 Street Address (P.O. Box Number is Not Acceptable) 1031 N Miami Beach Blvd, 83 N Miami Beach Fl.33013 84 City Miami 85 Zip Code FL 33013
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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

(Signature typed or printed name of registered agent and title if applicable)

(If 1011 Registered Agent signature required when registering)

1/6/1995

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY ST ZIP P WHITE, ALLAN 7985 NW 174TH STREET HALEAH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP VST WHITE, BETTY 7985 NW 174TH STREET HALEAH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY ST ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY ST ZIP ☐ 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

REMITTED BY MAY 1

SIGNATURE:

Allan White

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature/Phone #

1/6/95 305 8221444