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

APPROVED AND FILED
95 APR 28 AM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000001020 (6)

1. Corporation Name
LEMARQUIS INTERNATIONAL, INC.

Principal Place of Business
11857 SANDLAKE DRIVE
BOCA RATON FL 33428

Mailing Address
11857 SANDLAKE DRIVE
BOCA RATON FL 33428

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 2201 Corporate Blvd NW
Suite, Apt #, etc.
22 Suite 107
City & State
23 Boca Raton FLA
Zip 24 33431 Country 25 USA

2a. Mailing Address
26 SAME
Suite, Apt #, etc. 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualified: 03/01/1994
3a. Date of Last Report:
4. FEI Number: 11-2597106 ☐ 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
RIND, BERND
11857 SANDLAKE DRIVE
BOCA RATON FL 33428

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVC	1 1 TITLE		☐ Change ☐ Addition
NAME	RIND, BERND	1 2 NAME		
STREET ADDRESS	11857 SANDLAKE DRIVE	1 3 STREET ADDRESS		
CITY ST ZIP	BOCA RATON FL 33428	1 4 CITY ST ZIP		
TITLE	V	2 1 TITLE		☐ Change ☐ Addition
NAME	WEINSTEIN, ALAN	2 2 NAME		
STREET ADDRESS	174 OCEAN AVENUE, 38 LANDS END	2 3 STREET ADDRESS		
CITY ST ZIP	SEABRIGHT NJ 07760	2 4 CITY ST ZIP		
TITLE	ST	3 1 TITLE		☐ Change ☐ Addition
NAME	BAUMAN, IRWIN	3 2 NAME		
STREET ADDRESS	61 CARRIAGE ROAD	3 3 STREET ADDRESS		
CITY ST ZIP	ROSLYN NY 11576	3 4 CITY ST ZIP		
TITLE	D	4 1 TITLE	David Langevin	☒ Change ☐ Addition
NAME	JARECKI, HENRY DR	4 2 NAME	2224 Copperfield Dr.	
STREET ADDRESS	4 WORLD TRADE CENTER	4 3 STREET ADDRESS	Mendota Heights MN 55120	
CITY ST ZIP	NEW YORK NY 10048	4 4 CITY ST ZIP		
TITLE	C	5 1 TITLE	Ronald Goldberger	☒ Change ☐ Addition
NAME	SUSKIND, DENNIS	5 2 NAME	125 Park Avenue	
STREET ADDRESS	85 BROAD STREET	5 3 STREET ADDRESS	New York, N.Y. 10017	
CITY ST ZIP	NEW YORK NY 10004	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 110.07(3)(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 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: X [signature] Pres. 4/25/95 (407) 998-9199
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
BERND RIND

0265502 CP