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CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 3:59

RECEIVED
TALLAHASSEE, FLORIDA

DOCUMENT # F94000006317 (1)

1. Corporation Name

SIMRAY CAPITAL CORPORATION-DELAWARE

Principal Place of Business

12955 BISCAYNE BLVD
PENTHOUSE A
MIAMI FL 33181

Mailing Address

12955 BISCAYNE BLVD
PENTHOUSE A
MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 12955 BISCAYNE BLVD

26 12955 BISCAYNE BLVD

Suite, Apt., etc

Suite, Apt., etc

22 SUITE #406

27 SUITE #406

City & State

City & State

23 N. Miami FL

28 N. Miami FL

Zip

County

Zip

County

24 33181

25 V.S.A

29 33181

30 V.S.A

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature: Typed or printed name of registered agent and title if applicable

DATE: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PC
EVANS, RAYMOND A
17890 N.E. 31ST, APT. 3211
MIAMI FL 33160

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TDV
MUNDLAK, SIMON
1000 EAST ISLAND BLVD, SUITE 906
MIAMI FL 33160

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
200001489902
-05/17/95 --01016--017
*****225.00 *****225.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
MEHRFAR, EDWARD O
2000 BROADWAY APT. 8-G
NEW YORK NY 10023

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

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)(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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95
MAY 10, 1995 (20) 893733