

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Montalvo Secretary of State Division of Corporations
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DOCUMENT # G11335 (8)

NELSON HOLDINGS III, INC.

Principal Place of Business % FIKRY ISSA 2917 SOUTH OCEAN BLVD. HIGHLAND BEACH FL 33431	Mailing Address % FIKRY ISSA 2917 SOUTH OCEAN BLVD. HIGHLAND BEACH FL 33431
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2. Principal Place of Business 21 State: Apt. # 00 22 City & State 23 City & State	2a. Mailing Address 26 State: Apt. # 00 27 City & State 28 City & State
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3. Date incorporated or qualified 12/02/1982	3a. Date of last report 05/01/1994
4. FID Number 59-2295911	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 notice, for information purposes only, of the Florida Statutes. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**ISSA, FIKRY
2917 SOUTH OCEAN BLVD.
HIGHLAND BEACH FL 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 609.01, 609.02 and 609.03, 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, as the 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 set forth in the Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
TITLE	VTD	1. TITLE	☐ Change ☐ Addition
NAME	ISSA, FIKRY	2. NAME	
STREET ADDRESS	2917 S OCEAN BLVD	3. STREET ADDRESS	
CITY & STATE	HIGHLAND BEACH FL	4. CITY & STATE	
TITLE	PD	5. TITLE	☐ Change ☐ Addition
NAME	ALGUIRE, WILLIAM G. JR	6. NAME	
STREET ADDRESS	2917 S OCEAN BLVD	7. STREET ADDRESS	
CITY & STATE	HIGHLAND BEACH FL	8. CITY & STATE	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY & STATE		12. CITY & STATE	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY & STATE		16. CITY & STATE	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY & STATE		20. CITY & STATE	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 609.01, 609.02, 609.03, Florida Statutes. I further certify that the information is not subject to the annual report or supplementary annual report filing and is available and that my signature shall serve the same legal effect as if made under oath. That I am an officer or director of the corporation or the secretary or treasurer empowered to execute this report as required by Chapter 609, Florida Statutes, and that my name appears in Block 9 of this filing or on an affidavit filed with an address.

SIGNATURE:  **FIKRY ISSA** **4/12/95**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR