

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

APPROVED
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95 MAY -1 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **G22119** (3)

1. Corporation Name

REINHARDT & CAVANAGH, INC.

Principal Place of Business

3223 N.W. 10TH TERRACE
606
FT. LAUDERDALE FL 3309-940
US

Mailing Address

3223 N.W. 10TH TERRACE
606
FT. LAUDERDALE FL 33309-5940
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/07/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2244218

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CAVANAGH, THOMAS B.
535 N.E. 3RD AVE.
FT. LAUDERDALE FL 33301

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

Signature of Registered Agent (Printed Name of Registered Agent and Title of Agent)

Signature of Registered Agent (Printed Name of Registered Agent and Title of Agent)

DAY

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

PD

REINHARDT, EDWIN P.
1513 WILEY ST.
HOLLYWOOD 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

VD

CAVANAGH, THOMAS B.
119 N.W. 93RD TERRACE
CORAL SPRINGS 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

SD

REINHARDT, ANNEKE
1513 WILEY ST.
HOLLYWOOD FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TD

CAVANAGH, ELIZABETH B.
119 N.W. 93RD TERRACE
CORAL SPRINGS FL

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

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY ST ZIP

☐ Change ☐ Addition

SIGNATURE: *Thomas B. Cavanagh*

THOMAS B. CAVANAGH

4/27/95 305 564-2402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Typed Name)