

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 MAR -3 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G28948 (9)

1. Corporation Name
STUD VENI, INC.

Principal Place of Business
**4410 S.W. 73 TERRACE
DAVIE FL 33314**

Mailing Address
**4410 S.W. 73 TERRACE
DAVIE FL 33314**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
03/22/1983

3a. Date of Last Report
03/18/1994

4. FEI Number
52-1349423

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRATT, ERNEST A
4410 S.W. 73RD TERRACE
DAVIE FL 33314**

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

(Sign or type and printed name of registered agent and then if applicable)

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BRATT, ERNEST A.
STREET ADDRESS	4410 S.W. 73 TERRACE
CITY- ST- ZIP	DAVIE FL
TITLE	TD
NAME	BRATT, JONATHAN A
STREET ADDRESS	4410 SW 73RD TERR
CITY- ST- ZIP	DAVIE FL
TITLE	SD
NAME	HUSKINS, EULA URSULA
STREET ADDRESS	4410 S.W. 73 TERRACE
CITY- ST- ZIP	DAVIE FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE	☐ Change ☐ Addition
1. 2 NAME	
1. 3 STREET ADDRESS	
1. 4 CITY- ST- ZIP	
2. 1 TITLE	☐ Change ☐ Addition
2. 2 NAME	
2. 3 STREET ADDRESS	
2. 4 CITY- ST- ZIP	
3. 1 TITLE	☐ Change ☐ Addition
3. 2 NAME	
3. 3 STREET ADDRESS	
3. 4 CITY- ST- ZIP	
4. 1 TITLE	☐ Change ☐ Addition
4. 2 NAME	
4. 3 STREET ADDRESS	
4. 4 CITY- ST- ZIP	
5. 1 TITLE	☐ Change ☐ Addition
5. 2 NAME	
5. 3 STREET ADDRESS	
5. 4 CITY- ST- ZIP	
6. 1 TITLE	☐ Change ☐ Addition
6. 2 NAME	
6. 3 STREET ADDRESS	
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 119.07(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 asterisk.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ernest A. Bratt
2/27/1995 (305) 6376.