

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

05 MAY -1 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G49028**

(5)

1. Corporation Name

DREYER STUDIO, INC.

Principal Place of Business

**2525 S. W. 3RD AVENUE, SUITE 401
MIAMI FL 33129**

Mailing Address

**2525 S. W. 3RD AVENUE, SUITE 401
MIAMI FL 33129**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/01/1983** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-2305581** Applied For ☐ Not Applicable ☐

5. Certificate of Status: Domestic ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

6. This corporation has elected not to comply with annual filing requirements of Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City, St., Zip

23. City, St., Zip

24. City, St., Zip

2a. Mailing Address

26. State, Apt. #, etc.

27. City, St., Zip

28. City, St., Zip

29. City, St., Zip

9. Name and Address of Current Registered Agent

**DREYER, LINDA
2525 SW 3RD AVE, STE 401
MIAMI FL 33129**

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. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office as a permanent place of business in the State of Florida, such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am aware that if I am not a resident of the State of Florida, I must also file a statement of qualification with the Department of State.

Signature

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

NAME	PST DREYER, LINDA
STREET ADDRESS	2525 SW 3RD AVENUE
CITY, ST., ZIP	MIAMI FL 33129
NAME	VD DREYER, LINDA
STREET ADDRESS	2525 SW 3RD AVENUE
CITY, ST., ZIP	MIAMI FL 33129
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST., ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST., ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST., ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST., ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST., ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and given, and qualify for this exemption established in the laws of the State of Florida. I further certify that the information included in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if I were under oath. I am qualified to act as director of this corporation as the recorder or treasurer or secretary as required by Chapter 687, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or as an attachment with an address.

SIGNATURE:

Linda Dreyer

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

305-854-6039