FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **G81841** **(0)**

1. Corporate Name
JULINE INVESTMENTS, INC.

Principal Place of Business
2001 ANDREWS AVENUE
POMPANO BEACH FL 33069

Mailing Address
2001 ANDREWS AVENUE
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/17/1983**
3a. Date of Last Report: **03/16/1994**

4. FEI Number: **59-2402456** ☐ 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. Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BULLY, BRAD
BROWARD FINANCIAL CENTER, STE 1460
500 E BROWARD BLVD
FT LAUDERDALE FL 33394

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 Section(s) 607.193 and 617.1928, Florida Statutes, the above named corporation submits the 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 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
01 Title	DP	☐ Change ☐ Addition
02 Name	MCCOY, LARRY W.	
03 Street Address	2001 ANDREWS AVENUE	
04 City St Zip	POMPANO BEACH FL	
05 Title	DS	☐ Change ☐ Addition
06 Name	MCCOY, FAITH	
07 Street Address	2001 ANDREWS AVENUE	
08 City St Zip	POMPANO BCH, FL 00000	
09 Title		☐ Change ☐ Addition
10 Name		
11 Street Address		
12 City St Zip		
13 Title		☐ Change ☐ Addition
14 Name		
15 Street Address		
16 City St Zip		
17 Title		☐ Change ☐ Addition
18 Name		
19 Street Address		
20 City St Zip		
21 Title		☐ Change ☐ Addition
22 Name		
23 Street Address		
24 City St Zip		

14. I 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)(i), 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 with an address.

SIGNATURE: T Mc Coy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Telephone Number

0115205 CF