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 MAY -1 PM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G90987 (0)

1. Corporation Name
AQUARIUS RARE COINS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
% CHARLES HUFFMAN ~~1350 NE 144 STREET~~ ~~MIAMI FL 33161~~ CHANGE ADDRESS TO 172 NE. 167 ST MIAMI FL 33162	% CHARLES HUFFMAN ~~1350 NE 144 STREET~~ ~~MIAMI FL 33161~~ CHANGE ADDRESS TO % CHARLES HUFFMAN 2045 NE. 198 TERR. MIAMI FL. 33179

3. Date Incorporated or Qualified: 02/15/1984
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business	2a. Mailing Address
21 172 N.E. 167 ST.	26 C.HARLES HUFFMAN
Suite, Apt. #, etc. 22 MIAMI FLORIDA	Suite, Apt. #, etc. 27 2045 N.E. 198 TERR
City & State 23	City & State 28 MIAMI FLORIDA
Zip / Country 24 33162 25 U.S.A	Zip / Country 29 33179 30 U.S.A.

4. FEI Number: 59-2422719 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of ~~New~~ Registered Agent
HUFFMAN, CHARLES ~~1350 NE 144 STREET~~ ~~MIAMI FL 33161~~ NOW 2045 N.E. 198 TERR. MIAMI FLORIDA 33179	81 Name: SAME HUFFMAN CHARLES 82 Street Address (P.O. Box Number is Not Acceptable): 2045 N.E. 198 TERR. 83 84 City: MIAMI FL 85 Zip Code: 33179

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☐ Change ☑ Addition
NAME	HUFFMAN, CHARLES	12 NAME	HUFFMAN, CHARLES	
STREET ADDRESS	2045 NE 198 TERR	13 STREET ADDRESS	2045 NE. 198 TERR	
CITY-ST-ZIP	MIAMI FL 33179	14 CITY-ST-ZIP	MIAMI FL. 33179	
TITLE	SD	21 TITLE	SD	☑ Change ☐ Addition
NAME	HUFFMAN, WILLIAM	22 NAME	HUFFMAN WILLIAN	
STREET ADDRESS	~~1350 NE 144 STREET~~ NEW ADDRESS 3421 N.W. 26 AVE	23 STREET ADDRESS	3421 N.W. 26 AVE.	
CITY-ST-ZIP	MIAMI FL BOCA-RATON FL. ZIP 33434	24 CITY-ST-ZIP	BOCA-RATON FL. 33434-3421	
TITLE	TD	31 TITLE	TD	☑ Change ☐ Addition
NAME	HUFFMAN, LENA	32 NAME	HUFFMAN LENA	
STREET ADDRESS	~~1350 NE 144 STREET~~ NEW ADDRESS 3421 NW 26 AVE.	33 STREET ADDRESS	3421 N.W. 26 AVE.	
CITY-ST-ZIP	MIAMI FL BOCA-RATON FL. ZIP 33434	34 CITY-ST-ZIP	BOCA-RATON FL 33434-3421	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(i), Florida Statutes. I further certify that the information indicated on the 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 address.

SIGNATURE: CHARLES MICHAEL HUFFMAN 4/20/95 (305) 949-2096
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0173716 CP