

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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY 25 AM 11:08

DOCUMENT # H41316

(1)

1. Corporation Name

STEWART TILGHMAN FOX & BIANCHI, P.A.

Principal Place of Business

**% LARRY S. STEWART
44 W. FLAGLER ST., S-1900
MIAMI FL 33130**

Mailing Address

**% LARRY S. STEWART
44 W. FLAGLER ST., S-1900
MIAMI FL 33130**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
02/01/1985

3a. Date of Last Report
03/08/1994

4. FEI Number
59-2493895

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

21. Suite, Apt. #, etc.

22. City & State

23. ZIP

Country

24. ZIP

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. ZIP

Country

29. ZIP

Country

9. Name and Address of Current Registered Agent

**STEWART, LARRY S.
44 W. FLAGLER ST.
SUITE 1900
MIAMI FL 33130**

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, typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
STEWART, LARRY
44 W. FLAGLER STREET
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
TILGHMAN, JAMES
44 W FLAGLER ST.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
FOX, GARY D.
44 W FALGER ST
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
BIANCHI, DAVID W.
44 W FLAGLER ST
MIAMI 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
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

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 110.07(3)(b), Florida Statutes. I further certify that the information included 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; a person 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/19/95 3053586644
Date (Type/print name)