

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

'95 APR 28 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H50567

(7)

1. Corporation Name

PINKHAUS DESIGN CORPORATION

Principal Place of Business

2424 S. DIXIE HWY.
SUITE 201
MIAMI FL 33133

Mailing Address

2424 S. DIXIE HWY.
SUITE 201
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/04/1985

3a. Date of Last Report

07/26/1994

4. FEI Number

59-2520570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$3.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 MIAMI, FLORIDA

2a. Mailing Address

26 2424 S. Dixie Hwy.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SAME AS ABOVE

27 Ste 201

City & State

City & State

23 Zip

Country

28 MIAMI FL

Zip

Country

24

25

29 33133

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, ALLEN J., ESQ.
100 SE 2ND ST
STE 3920
MIAMI FL 33131

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 fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD
FULLER, JOEL
2205 SE 28TH STREET
MIAMI FL

11 TITLE

☐ Change ☐ Addition

NAME

12 NAME

STREET ADDRESS

13 STREET ADDRESS

CITY - ST - ZIP

14 CITY - ST - ZIP

TITLE

SDV
CANTOR, MARK
2424 S. DIXIE HWY #201
MIAMI FL

21 TITLE

☐ Change ☐ Addition

NAME

22 NAME

STREET ADDRESS

23 STREET ADDRESS

CITY - ST - ZIP

24 CITY - ST - ZIP

TITLE

SDV
CANTOR, MARK
2424 S. DIXIE HWY #201
MIAMI FL

31 TITLE

☐ Change ☐ Addition

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY - ST - ZIP

34 CITY - ST - ZIP

TITLE

SDV
CANTOR, MARK
2424 S. DIXIE HWY #201
MIAMI FL

41 TITLE

☐ Change ☐ Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY - ST - ZIP

44 CITY - ST - ZIP

TITLE

SDV
CANTOR, MARK
2424 S. DIXIE HWY #201
MIAMI FL

51 TITLE

☐ Change ☐ Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY - ST - ZIP

54 CITY - ST - ZIP

TITLE

SDV
CANTOR, MARK
2424 S. DIXIE HWY #201
MIAMI FL

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)(k), 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 address.

SIGNATURE: X. Mark Cantor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-95

Date

(305) 854-1000

Telephone Number