

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL 12 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-07/13/95--01072--010

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # H 63458

1. Corporation Name

FEDERAL RECORD SERVICE CORP

Principal Place of Business

9301 SW 12th AVE
MIAMI FLORIDA

Mailing Address

C 420
33176

3. Date Incorporated or Qualified

6-24-85

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

1500 BAY ROAD #244

City & State

MIAMI BEACH FL

Zip

33139

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

90 JAY SEINFELD

City & State

MIAMI BEACH FL

Zip

33139

Country

4. FEI Number

59-2561560

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SEINFELD, JAY
9301 SW 12th AVE #C420
MIAMI, FL 33176

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1500 BAY ROAD #244

83

84

City MIAMI BEACH

FL

85 Zip Code 33139

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
SEINFELD, JAY
9301 SW 12th AVENUE #C420
MIAMI, FL 33176

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

P
SEINFELD, JAY
1500 BAY ROAD #244
MIAMI BEACH, FL 33139

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

7/5 7/1/95

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, on an attachment with an address.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Define Here

REMITTED BY MAY 1

7/1/95 305-932-1017