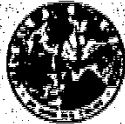


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$375 (IF DISSOLVED, REMAINING AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUL 18 AM 9:59

DOCUMENT # J00794

(4)

1. Corporation Name

EXECUTIVE HUNTING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1917 PALM VISTA DR
APOPKA FL 32712

Mailing Address

1917 PALM VISTA DR
APOPKA FL 32712

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/18/1986

3a. Date of Last Report

04/12/1994

4. FEI Number

59-2654668

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

21 831 RIVERBEND BLVD.

Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. BOX 651

Suite, Apt. #, etc.

City & State

23 LONGWOOD, FLORIDA

Zip

Country

24 32779

25 SEMINOLE

City & State

28 APOPKA, FLORIDA

Zip

Country

29 32704-0651

30 ORANGE

9. Name and Address of Current Registered Agent

GOLDENBERG, CHARLES A.
1917 PALM VISTA DR
APOPKA FL 32712

10. Name and Address of New Registered Agent

01 Name

GOLDENBERG, CHARLES A.

02

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

831 RIVERBEND BLVD.

03

City

LONGWOOD,

FL

05 Zip Code

32779

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

Charles A. Goldenberg

CHARLES A. GOLDENBERG, PRESIDENT 13 JULY 1995

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GOLDENBERG, CHARLES A.
STREET ADDRESS 1917 PALM VISTA DRIVE
CITY - ST - ZIP APOPKA FL

TITLE VPD
NAME GOLDENBERG, AUBREY H.
STREET ADDRESS 1912 BELMONT PLACE
CITY - ST - ZIP METAIRIE LA

TITLE STD
NAME STEVENS, ROXANNE
STREET ADDRESS 2620 ATTLEBORO PLACE
CITY - ST - ZIP APOPKA FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 PRESIDENT/DIRECTOR ☒ Change ☐ Addition
1.2 NAME GOLDENBERG, CHARLES A.
1.3 STREET ADDRESS 831 RIVERBEND BLVD.
1.4 CITY - ST - ZIP LONGWOOD, FLORIDA 32779

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME SAME O.K.
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME DELETE MS. STEVENS FROM FILE
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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:

Charles A. Goldenberg

CHARLES A. GOLDENBERG, PRESIDENT 13 JULY 95.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature (Typed)