

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 MAR 22 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K 39144 (6)

1. Corporation Name

ARTHUR-LAWRENCE ASSO. INC.

Principal Place of Business

Mailing Address

11 HAMPSHIRE LA.
BOYNTON BEACH FL 33436

11 HAMPSHIRE LA
BOYNTON BEACH
FL 33436

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
10/17/1988	03/15/1994
4. FEI Number	Applied For
65-0084027	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐
7. This corporation has liability for intangible tax under § 199.032, Florida Statutes	☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ARONSON HAZEL G.
11 HAMPSHIRE LA
BOYNTON BEACH FL 33436

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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

Lawrence Aaronson

(Signature typed or printed below of individual and of each corporation)

2-18-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
STREET ADDRESS	11 HAMPSHIRE LA	13 STREET ADDRESS	14 CITY - ST - ZIP
CITY - ST - ZIP	BOYNTON BEACH FL	21 TITLE	22 NAME
		23 STREET ADDRESS	24 CITY - ST - ZIP
		31 TITLE	32 NAME
		33 STREET ADDRESS	34 CITY - ST - ZIP
		41 TITLE	42 NAME
		43 STREET ADDRESS	44 CITY - ST - ZIP
		51 TITLE	52 NAME
		53 STREET ADDRESS	54 CITY - ST - ZIP
		61 TITLE	62 NAME
		63 STREET ADDRESS	64 CITY - ST - ZIP

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****200.00 ****200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and designed equally for the corporation stated in the filing. 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, director, or the corporation or the receiver or trustee empowered to make the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing, or on an attachment with this filing.

SIGNATURE

LAWRENCE ARONSON

(Signature and typed or printed name of officer or director)

2/18/95

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Montfau
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *K 39724*
1. Corporation Name
HENRY FUTURES, INC.

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
150 Ridge Street
Reno, Nevada 89501

Mailing Address
c/o Roland Langen, Esq.
112 South Hibiscus Dr.
Miami, FL 33139

DO NOT WRITE IN THIS SPACE

9. Date Incorporated or Chartered 10/18/88	3a. Date of Last Report 1994
4. FEI Number 65-0359036	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. 190.032, Florida Statutes. ☐ Yes ☒ No	

2. Principal Place of Business 21. 150 Ridge Street	2b. Mailing Address 26. c/o Roland Langen, Esq. 112 South Hibiscus Dr. Miami, FL 33139
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State Reno, Nevada	28. City & State
24. Zip 89501	29. Country U.S.A.
30. Zip	31. Country

9. Name and Address of Current Registered Agent Roland Langen, Esq. 112 South Hibiscus Drive Miami, Florida 33139	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
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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 of person or persons of registered agent and their representative (if any) _____
Signature of registered agent (signature required after 10/2/95) _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (if any)	
TITLE	NAME	1. TITLE	DPT ☒ Change ☐ Addition
STREET ADDRESS	NAME	2. NAME	Dee Clustka
CITY, ST, ZIP	STREET ADDRESS	3. STREET ADDRESS	150 Ridge Street
	CITY, ST, ZIP	4. CITY, ST, ZIP	Reno, Nevada 89501
		5. TITLE	S ☒ Change ☐ Addition
		6. NAME	Corine Sellers
		7. STREET ADDRESS	150 Ridge Street
		8. CITY, ST, ZIP	Reno, Nevada 89501
		9. TITLE	☐ Change ☐ Addition
		10. NAME	
		11. STREET ADDRESS	
		12. CITY, ST, ZIP	
		13. TITLE	☐ Change ☐ Addition
		14. NAME	
		15. STREET ADDRESS	
		16. CITY, ST, ZIP	
		17. TITLE	☐ Change ☐ Addition
		18. NAME	
		19. STREET ADDRESS	
		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the corporation stated in law. I do hereby 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 as changed, or as an attachment with an address.

SIGNATURE: *X Dee Clustka*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Dee Clustka

(702) 322-0101