

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

**CORPORATION
STATE ANNUAL REPORT
FLORIDA 1995**



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

**APPROVED
AND
FILED**

93 MAY - 1 AM 8:55

DOCUMENT # J73365

(5)

1. Corporation Name

TRADE SHOW INTERNATIONAL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**800 EAST INDIANTOWN ROAD
JUPITER FL 33477**

Mailing Address

**800 EAST INDIANTOWN ROAD
JUPITER FL 33477**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1987

3a. Date of Last Report

06/07/1994

4. FEI Number

59-2808703

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 interstate tax under D-122-022,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite Apt. #, etc.

22

Suite Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Florida

25

Zip

29

Florida

30

9. Name and Address of Current Registered Agent

**MASON, WM. J.
800 E INDIANTOWN RD #207
JUPITER FL 33477**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number's 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 of person (other than registered agent) authorized to execute this statement (607.0505, Florida Statutes) _____
Signature of registered agent (607.1508, Florida Statutes) _____

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
MASON, WILLIAM J.
800 E INDIANTOWN RD #207
JUPITER FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
MASON, SUSAN
800 E INDIANTOWN RD #207
JUPITER FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

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

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, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.01(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 and force 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.

SIGNATURE:

Susan S. Mason **Susan S. Mason**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/95

407 747 9400