

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 8:16

DOCUMENT # K76381

(8)

1. Corporation Name

M AND B BUSINESS CO

Principal Place of Business

Mailing Address

% BARUCH SPIVAK
13941 S.W. 52ND TERR.
MIAMI FL 33175

% BARUCH SPIVAK
13941 S.W. 52ND TERR.
MIAMI FL 33175

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/22/1989

3a. Date of Last Report

01/25/1994

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

NOT APPLICABLE

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. 190.001,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPIVAK, BARUCH
13941 S.W. 52ND TERR.
MIAMI FL 33175

01 Name

02 Street Address (P.O. Box Numbers Not Acceptable)

03

04 City

FL

05

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 current agent and new agent, if applicable) (Date) (Signature) Agent (Signature) Agent (Signature) Agent (Signature) Agent

1-10-95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	SPIVAK, BARUCH
STREET ADDRESS	13941 S.W. 52ND TERR.
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
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CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14 NAME		☐ Change ☐ Addition
15 STREET ADDRESS		
16 CITY, ST, ZIP		
17 NAME		☐ Change ☐ Addition
18 STREET ADDRESS		
19 CITY, ST, ZIP		
20 NAME		☐ Change ☐ Addition
21 STREET ADDRESS		
22 CITY, ST, ZIP		
23 NAME		☐ Change ☐ Addition
24 STREET ADDRESS		
25 CITY, ST, ZIP		
26 NAME		☐ Change ☐ Addition
27 STREET ADDRESS		
28 CITY, ST, ZIP		
29 NAME		☐ Change ☐ Addition
30 STREET ADDRESS		
31 CITY, ST, ZIP		

14. I do hereby certify that the information submitted with this filing is substantially true and correct and that I am an officer or director of the corporation or the receiver or liquidator empowered to receive 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Baruch Spivak DIRECTOR 1-10-95

(305) 226-3094