

04-28-1995 08:19AM FROM KATZ, DAITZMAN & GORDON
FILE NOW: FILING FEE AFTER MAY 1 IS \$226.00

TO 14076889136 2 23
APPROVED
AND
FILED

95 MAY -1 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0000001482160
05/10/95--1016--013
****208.75 ****200.75

DO NOT WRITE IN THIS SPACE.

2. Date incorporated or Qualified 06/27/1989	3a. Date of Last Report 10/24/1994
4. Fil Number 65-0144801	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Poll: Filing Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 169.032. Florida Statutes ☒ Yes ☐ No	

Principal Place of Business
1547 FLORIDA MANGO ROAD
BLDG. 11, UNIT 3
WEST PALM BEACH FL 33406

Mailing Address
1547 FLORIDA MANGO ROAD
BLDG. 11, UNIT 3
WEST PALM BEACH FL 33406

21. Principal Place of Business 1547 FLORIDA MANGO RD. N. Suite, Apt. #, etc. 22. Bldg. 11, Unit 3 City & State WPB, FLA. 23. Zip 33409	24. Mailing Address Box 15454 Suite, Apt. #, etc. 27. City & State WPB, FLA. 28. Zip 33416
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9. Name and Address of Current Registered Agent

O'HARA, PATRICK M ESQUIRE
324 DATURA STREET, COMMERCE CENTER
WEST PALM BEACH FL 33401

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 607.1808, 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 date of application

NOTE: Registered Agent services required when necessary

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MOORE, JAMES B	1.2 NAME	
STREET ADDRESS	1547 FLORIDA MANGO ROAD N.	1.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33406	1.4 CITY - ST - ZIP	
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	WOOSTER, ROBERT A	2.2 NAME	
STREET ADDRESS	1547 FLORIDA MANGO ROAD N.	2.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL 33406	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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)(a), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

Date

Debiting Share

TOTAL P.03