

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

APPROVED
AND
FILED

95 MAY -1 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # L00860

(1)

1. Corporation Name

MR. MELBOURNE TUX, INC.

Principal Place of Business

924 WEST NEW HAVEN AVENUE
MELBOURNE FL 32901-4240
US

Mailing Address

428 AMERICAN LGN HIGHWAY
REVERE MA 02151
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1989

3a. Date of Last Report

08/19/1994

4. FEI Number

65-0137666

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

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26 1403 S.W. 8th Street

Suite, Apt. #, etc.

27

City & State

28 Pompano Beach, FL

Zip Country

29 33069 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ATKIN, IRVING
5422 SAN MARINO WAY
LAKEWORTH 33463

81 Name

82 Street Address (P.O. Box Number is 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	MCKANAS, SHERYL	34 PROSPECT STREET	MELROSE MA
T	ATKIN, ARNOLD	34 PROSPECT STREET	MELROSE MA
S	HERSHFIELD, MICHAEL	1465 MAILBUO CIRCLE, NORTHEAST, #109	BALM BAY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
☐ Change ☐ Addition			
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP
☐ Change ☐ Addition			
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP
☐ Change ☐ Addition			
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP
☐ Change ☐ Addition			
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP
☐ Change ☐ Addition			
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP
☐ Change ☐ Addition			

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, trustee or empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am not, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

305-9439600

Date

Telephone Number