

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 2:42

DOCUMENT # L07488

(4)

1. Corporation Name

A & R CID ENTERPRISES INC.

Principal Place of Business

% ALEXANDER CID
5401 SW 210 TERR
FT LAUDERDALE FL 33332

Mailing Address

% ALEXANDER CID
5401 SW 210 TERR
FT LAUDERDALE FL 33332

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/08/1989	3a. Date of Last Report 06/16/1994
4. FEI Number 65-0144720	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	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

CID, ALEXANDER
5401 SW 210 TERR
FT LAUDERDALE FL 33332

10. Name and Address of New Registered Agent

B1 Name	B5 Zip Code
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	CID, ALEXANDER	1.2 NAME	
STREET ADDRESS	5401 SW 210 TERR	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	1.4 CITY - ST - ZIP	
TITLE	VST	2.1 TITLE	☐ Change ☐ Addition
NAME	CID, RIGOBERTO	2.2 NAME	
STREET ADDRESS	5401 SW 210 TERR	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	CID, RIGOBERTO	3.2 NAME	
STREET ADDRESS	5401 SW 210 TERR	3.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	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)(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 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:

Reid
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.2 95. (305) 434-7084
DATE