

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # L12700

(5)

1. Corporation Name

AUGUST KOHN & COMPANY, INC.

Principal Place of Business

**% AUGUST KOHN
13041 NW FIRST ST
PLANTATION FL 33325**

Mailing Address

**% AUGUST KOHN
13041 NW FIRST ST
PLANTATION FL 33325**

APPROVED
AND
FILED

95 APR 10 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/29/1989

3a. Date of Last Report

04/28/1994

4. FEI Number

65-0139725

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

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

Country

9. Name and Address of Current Registered Agent

**KOHN, AUGUST
13041 NW FIRST ST
PLANTATION FL 33325**

10. Name and Address of New Registered Agent

81 Name

AUGUST KOHN

82 Street Address (P.O. Box Number is Not Acceptable)

13041 NWFIRST ST

83

84 City

PLANTATION

FL

85 Zip Code

33325

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

August Kohn **AUGUST**

4/1/95

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **KOHN, AUGUST**
STREET ADDRESS **13041 NW FIRST ST**
CITY - ST - ZIP **PLANTATION FL**

TITLE
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CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 **TITLE** ☐ Change ☐ Addition

12 **NAME**

13 **STREET ADDRESS**

14 **CITY - ST - ZIP**

21 **TITLE** ☐ Change ☐ Addition

22 **NAME**

23 **STREET ADDRESS**

24 **CITY - ST - ZIP**

31 **TITLE** ☐ Change ☐ Addition

32 **NAME**

33 **STREET ADDRESS**

34 **CITY - ST - ZIP**

41 **TITLE** ☐ Change ☐ Addition

42 **NAME**

43 **STREET ADDRESS**

44 **CITY - ST - ZIP**

51 **TITLE** ☐ Change ☐ Addition

52 **NAME**

53 **STREET ADDRESS**

54 **CITY - ST - ZIP**

61 **TITLE** ☐ Change ☐ Addition

62 **NAME**

63 **STREET ADDRESS**

64 **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:

August Kohn **AUGUST KOHN, PRES.**

4/1/95 **(805) 474-5555**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number