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CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JUN -7 AM 9:26

DOCUMENT # L 18200 (0)

1. Corporation Name

STAHL PARKING SYSTEMS, INC.

Principal Place of Business	Mailing Address
725 N.E. 125 ST. SUITE 200 N. MIAMI, FL. 33161	725 NE 125 ST, SUITE 200 N. MIAMI, FL. 33161

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9/22/1969	3a. Date of Last Report: 5/1/1994
4. FEI Number: 65-0147143	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 § 199.032 Florida Statutes: ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 725 N.E. 125 ST.	26 725 N.E. 125 ST.
Suite, Apt #, etc: 22 SUITE 200	Suite, Apt #, etc: 27 SUITE 200
City & State: 23 NORTH MIAMI, FLORIDA	City & State: 28 NORTH MIAMI, FLORIDA
Zip: 24 33161 / Country: 25 DADE	Zip: 29 33161 / Country: 30 DADE

9. Name and Address of Current Registered Agent

ARTHUR J. SCHULTZ
725 N.E. 125 STREET - SUITE 200
NORTH MIAMI, FLORIDA 33161

10. Name and Address of New Registered Agent

81 Name: ARTHUR J. SCHULTZ
82 Street Address (P.O. Box Number is Not Acceptable): 725 N.E. 125 STREET - SUITE 200
83 NORTH MIAMI, FLORIDA 33161
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: X Arthur J. Schultz ARTHUR J. SCHULTZ (PRESIDENT) MAY 22, 1995
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PRESIDENT / DIRECTOR ARTHUR J. SCHULTZ 764 CAMELON DRIVE FT. LAUDERDALE, FLORIDA 33326	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☐ Change ☐ Addition S00001509445 -06/09/95--01022--006 ****233.75 ****233.75
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VICE PRESIDENT - SEC. - TREASURER DIRECTOR MICHELLE SCHULTZ 764 CAMELON DRIVE FT. LAUDERDALE, FLORIDA 33326	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition KC

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)(i), 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: ARTHUR J. SCHULTZ (PRESIDENT) 5/22/95 (305) 891-5353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

X Arthur J. Schultz