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

APPROVED AND FILED

95 MAY -1 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L25496** **(5)**

1. Corporation Name
THE NEW BOOTERY II, INC.

Principal Place of Business	Mailing Address
7284 NW 54 ST MIAMI FL 33166	7284 NW 54 ST MIAMI FL 33166

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/26/1989
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
21: 16590 S. Dixie Hwy
22 Suite, Apt. #, etc.:
23 City & State: Miami FL
24 Zip: 33157
25 Country: USA

2a. Mailing Address
26: 16590 S. Dixe Hwy
27 Suite, Apt. #, etc.:
28 City & State: Miami FL
29 Zip: 33157
30 Country: USA

4. FEI Number: 65-0185085 ☐ 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

9. Name and Address of Current Registered Agent

HANNA, PAUL A.
7284 NW 54 ST
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name: Michael Hanna
82 Street Address (P.O. Box Number is Not Acceptable): 16590 S. Dixie Highway
83:
84 City: Miami FL 85 Zip Code: 33157

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 _____ Michael Hanna 4/21/95
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	ST	11 TITLE		☐ Change ☐ Addition
NAME	HANNA, PAUL	12 NAME	Delete Paul Hanna	
STREET ADDRESS	7284 NW 54 ST	13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP		
TITLE	PD	21 TITLE	P, D, T	☑ Change ☐ Addition
NAME	HANNA, MICHAEL	22 NAME	Michael Hanna	
STREET ADDRESS	7284 NW 54 ST	23 STREET ADDRESS	16590 S. Dixie Hwy	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	Miami FL 33157	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		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)(i), Florida Statutes. I further certify that the information indicated on the 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: x _____ Michael Hanna 4/21/95 (305)232-9920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0180630 CP