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
MAY
95 MAY -1 PM 12:40
SEC. OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L28336 (0)

1. Corporation Name:
FAMILY TRENDS, INC.

Principal Place of Business:
% STEPHEN V. HOFFMAN, ESQ.
2750 N FEDERAL HWY
FT LAUDERDALE FL 33306

Mailing Address:
% STEPHEN V. HOFFMAN, ESQ.
2750 N FEDERAL HWY
FT LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1989
3a. Date of Last Report: 04/28/1991

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # etc. — 22 / 27
City & State — 23 / 28
24 / 25 / 29 / 30

4. FEI Number: 65-0156304 ☐ 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. Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HOFFMAN, STEPHEN V., ESQ.
2750 N FEDERAL HWY
1994AUDERDALE FL 33306

10. Name and Address of New Registered Agent

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 Section 607.0505, 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

12. OFFICERS AND DIRECTORS

01	D
02 NAME	DRECHSLER, MARILYN
03 STREET ADDRESS	14127 EQUESTRIAN WAY
04 CITY ST ZIP	W PALM BEACH FL
05	D
06 NAME	DRECHSLER, THOMAS
07 STREET ADDRESS	14127 EQUESTRIAN WAY
08 CITY ST ZIP	W PALM BEACH FL
09	
10 NAME	
11 STREET ADDRESS	
12 CITY ST ZIP	
13	
14 NAME	
15 STREET ADDRESS	
16 CITY ST ZIP	
17	
18 NAME	
19 STREET ADDRESS	
20 CITY ST ZIP	
21	
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (1-6)

01	☐ Change ☐ Addition
02 NAME	
03 STREET ADDRESS	
04 CITY ST ZIP	
05	☐ Change ☐ Addition
06 NAME	
07 STREET ADDRESS	
08 CITY ST ZIP	
09	☐ Change ☐ Addition
10 NAME	
11 STREET ADDRESS	
12 CITY ST ZIP	
13	☐ Change ☐ Addition
14 NAME	
15 STREET ADDRESS	
16 CITY ST ZIP	
17	☐ Change ☐ Addition
18 NAME	
19 STREET ADDRESS	
20 CITY ST ZIP	
21	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 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 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 1 or Block 11 if changed, or on an attachment with an address.

SIGNATURE: Marilyn Drechsler (V.P.) 4/27/95 (407) 798-1279
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARILYN DRECHSLER

0213486 CP