

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L48164

(2)

1. Corporation Name

4481 N. W. 185 ST., INC.



Principal Place of Business

1201 S. OCEAN DR.
#219 SOUTH
HOLLYWOOD FL 33019
US

Mailing Address

1201 S. OCEAN DR. #219-5
#219 SOUTH
HOLLYWOOD FL 33019
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/07/1990

3a. Date of Last Report

04/25/1995

4. FEI Number

59-3056245

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

10. Name and Address of New Registered Agent

ARIAS, MARGUERITE
1201 S. OCEAN DR.
#219 SOUTH
HOLLYWOOD FL 33019

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 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 of Agent for production of documents upon request

Signature of Registered Agent for production of documents upon request

DATE

12. OFFICERS AND DIRECTORS

11. TITLE	12. NAME	13. STREET ADDRESS	14. CITY-STATE-ZIP	15. DELETE
D	ARIAS, JACK	1201 S OCEAN DR, #219-SO	HOLLYWOOD FL	☐
PD	ARIAS, MARGUERITE	1201 S OCEAN DR, #219-SO	HOLLYWOOD FL	☐
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				☐
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	12. NAME	13. STREET ADDRESS	14. CITY-STATE-ZIP	15. DELETE	16. CHANGE	17. ADDITION
				☐	☐	☐
				☐	☐	☐
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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 affidavit with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/96 (954) 920 9530
Date Date & Phone

CR2E034 (12/95)