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CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3:12

DOCUMENT # L59692 (8)

1. Corporation Name
SUCCESS UNLIMITED ENTERPRISES, INC.

Principal Place of Business
13333 BURTON TERR.
WEST PALM BCH. FL 33414-7705
US

Mailing Address
13333 BUROTN TERRACE
WEST PALM BCH. FL 33414-7705
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/19/1990
3a. Date of Last Report: 01/21/1994

2. Principal Place of Business — 21
Suite, Apt. #, etc — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 65-0203133 — 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
ELIE, MARK I.
2392 WROTHAM TERRACE
WEST PALM BCH. FL 33414

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 13333 Burton Terr
83
84 City: W Palm Bch FL 85 Zip Code: 33414

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 (Typed or printed name of registered agent for the change) — (If Registered Agent is a corporation, type or print name and title of officer) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P, S, T ☑ Change ☐ Addition
NAME	ELIE, LINDA	1.2 NAME	ELIE, LINDA
STREET ADDRESS	13333 BURTON TERRACE	1.3 STREET ADDRESS	13333 Burton Terr
CITY-ST-ZIP	WEST PALM BCH. FL	1.4 CITY-ST-ZIP	W Palm Bch, FL 33414
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	ELIE, MARK I	2.2 NAME	
STREET ADDRESS	13333 BURTON TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH. FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 12 or Block 13 of changed, or on an attachment with an address.

SIGNATURE: Linda Elie LINDA ELIE — 2-8-95 — 407-795-4679
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

0262602 CP