

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 APR 10 PM 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L68509 (3)

1. Corporation Name

ABU JOHN, INC.

Principal Place of Business

3135 DELANEY ST.
ORLANDO FL 32806

Mailing Address

3135 DELANEY ST.
ORLANDO FL 32806

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/27/1990

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

Zip

Country

29

Zip

Country

30

4. FEI Number

59-3006362

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

TORRES, JOHN J., SR
3135 DELANEY STREET
ORLANDO FL 32806

81 Name

John J. Torres, Jr.

82 Street Address (P.O. Box Number is Not Acceptable)

3135 Delaney Street

83

84 City

Orlando

FL

85 Zip Code

32806

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 John J. Torres, Jr.

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent Signature Required When Not Filled)

4/4/95

DATE

12. OFFICERS AND DIRECTORS

TITLE

PS

NAME

TORRES, JOHN J., SR.

STREET ADDRESS

3135 DELANEY ST

CITY - ST - ZIP

ORLANDO FL

TITLE

V

NAME

TORRES, OTLA

STREET ADDRESS

3135 DELANEY ST

CITY - ST - ZIP

ORLANDO FL

TITLE

T

NAME

TORRES, JOHN J.

STREET ADDRESS

3135 DELANEY ST.

CITY - ST - ZIP

ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PS

☒ Change ☐ Addition

1.2 NAME

JOHN J. TORRES, JR.

1.3 STREET ADDRESS

3135 Delaney St.

1.4 CITY - ST - ZIP

Orlando, FL 32806

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

T

☒ Change ☐ Addition

3.2 NAME

Mary A. Clark

3.3 STREET ADDRESS

3135 Delaney St.

3.4 CITY - ST - ZIP

Orlando, FL 32806

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 110.07(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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN J. TORRES, JR., Pres./Sec.

3/27/95

(Date)

(Signature Required)