

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Kendra B. Maham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 11:02

DOCUMENT # L71685

(6)

1. Corporation Name

CHAR-VIC CORPORATION

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/07/1990	3a. Date of Last Report 02/23/1994
4. FEI Number 59-3007825	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 § 199.032, Florida Statutes ☒ Yes ☐ No	

1. Principal Place of Business C/O KHALIL SALAMEH 8074 LONE STAR ROAD JACKSONVILLE FL 32211 US		2a. Mailing Address C/O KHALIL SALAMEH 8074 LONE STAR ROAD JACKSONVILLE FL 32211 US	
21. c/o Khalil Salameh	26. c/o Khalil Salameh	22. 119 W. Adams Street	27. 119 W. Adams Street
23. Jacksonville, Florida	28. Jacksonville, Florida	24. 32202	25. Duval
29. 32202	30. Duval		

9. Name and Address of Current Registered Agent SALAMEH, KHALIL E. 8074 LONE STAR ROAD JACKSONVILLE FL 32211		10. Name and Address of New Registered Agent Khalil E. Salameh 9433 Silhouette Drive Jacksonville FL 32217	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1908, 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: Khalil E. Salameh Khalil E. Salameh DATE: 2-13-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D SALAMEH, KHALIL E. 9433 SILHOUETTE JACKSONVILLE FL	11 NAME	☐ Change ☐ Addition
STREET ADDRESS		12 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		13 STREET ADDRESS	☐ Change ☐ Addition
NAME		14 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		15 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		16 STREET ADDRESS	☐ Change ☐ Addition
NAME		17 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		18 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		19 STREET ADDRESS	☐ Change ☐ Addition
NAME		20 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		21 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		22 STREET ADDRESS	☐ Change ☐ Addition
NAME		23 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		24 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		25 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		27 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		28 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		30 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		31 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		33 NAME	☐ Change ☐ Addition
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STREET ADDRESS		36 NAME	☐ Change ☐ Addition
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STREET ADDRESS		39 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		40 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		57 NAME	☐ Change ☐ Addition
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STREET ADDRESS		75 NAME	☐ Change ☐ Addition
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CITY, ST, ZIP		79 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		81 NAME	☐ Change ☐ Addition
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STREET ADDRESS		84 NAME	☐ Change ☐ Addition
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STREET ADDRESS		87 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		88 STREET ADDRESS	☐ Change ☐ Addition
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STREET ADDRESS		90 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		91 STREET ADDRESS	☐ Change ☐ Addition
NAME		92 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		93 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		94 STREET ADDRESS	☐ Change ☐ Addition
NAME		95 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		96 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		97 STREET ADDRESS	☐ Change ☐ Addition
NAME		98 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		99 NAME	☐ Change ☐ Addition
CITY, ST, ZIP		100 STREET ADDRESS	☐ Change ☐ Addition

14. I 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)(b), 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 in person. I am familiar with, and accept the obligations of, the provisions of the law of the State of Florida regarding the preparation of this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on any other filing with this office.

SIGNATURE: Khalil E. Salameh Khalil E. Salameh DATE: 2-13-95 984/354-9200