

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
FILED

DOCUMENT # L88862

(2)

1. Corporation Name

LINDA'S PARTY RENTAL & SALES, INC.

95 MAY - 1 11 2 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

6422 PEMBROKE ROAD
MIRAMAR FL 33023

Mailing Address

6422 PEMBROKE ROAD
MIRAMAR FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/20/1990

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0207084

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. The corporation has liability for intangible tax under S. 190.032,
Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

24

25

29

30

9. Name and Address of Current Registered Agent

STEADMAN, LINDA
6422 PEMBROKE ROAD
MIRAMAR FL 33023

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 Sections 607.0303 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 607.1505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required for Change of Agent)

Signature of Registered Agent (Required for Change of Office)

Signature of Director

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME DPS STEADMAN, LINDA 6050 S.W. 34TH STREET MIRAMAR FL	12.2 NAME	12.3 NAME	12.4 NAME	12.5 NAME	12.6 NAME	12.7 NAME	12.8 NAME	12.9 NAME	12.10 NAME
12.11 STREET ADDRESS	12.12 STREET ADDRESS	12.13 STREET ADDRESS	12.14 STREET ADDRESS	12.15 STREET ADDRESS	12.16 STREET ADDRESS	12.17 STREET ADDRESS	12.18 STREET ADDRESS	12.19 STREET ADDRESS	12.20 STREET ADDRESS
12.21 CITY, STATE, ZIP	12.22 CITY, STATE, ZIP	12.23 CITY, STATE, ZIP	12.24 CITY, STATE, ZIP	12.25 CITY, STATE, ZIP	12.26 CITY, STATE, ZIP	12.27 CITY, STATE, ZIP	12.28 CITY, STATE, ZIP	12.29 CITY, STATE, ZIP	12.30 CITY, STATE, ZIP

13.1 NAME	13.2 NAME	13.3 NAME	13.4 NAME	13.5 NAME	13.6 NAME	13.7 NAME	13.8 NAME	13.9 NAME	13.10 NAME
13.11 STREET ADDRESS	13.12 STREET ADDRESS	13.13 STREET ADDRESS	13.14 STREET ADDRESS	13.15 STREET ADDRESS	13.16 STREET ADDRESS	13.17 STREET ADDRESS	13.18 STREET ADDRESS	13.19 STREET ADDRESS	13.20 STREET ADDRESS
13.21 CITY, STATE, ZIP	13.22 CITY, STATE, ZIP	13.23 CITY, STATE, ZIP	13.24 CITY, STATE, ZIP	13.25 CITY, STATE, ZIP	13.26 CITY, STATE, ZIP	13.27 CITY, STATE, ZIP	13.28 CITY, STATE, ZIP	13.29 CITY, STATE, ZIP	13.30 CITY, STATE, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exception stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information reported 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 this 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 this report, or on an attachment with an address.

SIGNATURE:

Linda Steadman, Inc.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda Steadman, Inc. May 1, 95 (305) 981-1448