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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 APR 12 PM 10: 20

DOCUMENT # L88884 (6)

1. Corporation Name
EXECUTIVE DECISIONS, INC.

Principal Place of Business	Mailing Address
1414 N.W. 107TH AVENUE, SUITE 205 MIAMI FL 33172-2741 US	1414 N.W. 107TH AVENUE, SUITE 205 MIAMI FL 33172-2741 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 1414 NW 107 AVE-SUITE 215	2a. Mailing Address: 26 1414 N.W. 107 AVE.
22 Suite, Apt. #, etc: SUITE 215	27 Suite, Apt. #, etc: SUITE 215
23 City & State: MIAMI, FLA.	28 City & State: MIAMI, FLA.
24 Zip: 33172-2741 · 25 Country:	29 Zip: 33172-2741 · 30 Country:

3. Date Incorporated or Qualified: 07/20/1990
3a. Date of Last Report: 04/27/1994
4. FEI Number: 65-0207559 ☐ 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

SCOTT, A. R.
1414 N.W. 107TH AVENUE, SUITE 205
MIAMI FL 33172-9741

10. Name and Address of New Registered Agent

81 Name: A.R. Scott
82 Street Address (P.O. Box Number is Not Acceptable): 1414 N.W. 107 AVE-SUITE 215
83
84 City: MIAMI FL 85 Zip Code: 33172-2741

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] A.R. SCOTT 4-3-95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CPD	1 1 TITLE ☑ Change ☐ Addition
NAME	SCOTT, A. R.	1 2 NAME
STREET ADDRESS	1414 N.W. 107TH AVE #205	1 3 STREET ADDRESS 1414 N.W. 107 AVE-SUITE 215
CITY ST ZIP	MIAMI FL	1 4 CITY ST ZIP MIAMI FLA 33172-2741
TITLE	DVT	2 1 TITLE ☑ Change ☐ Addition
NAME	WEST, R. C.	2 2 NAME
STREET ADDRESS	1414 N.W. 107TH AVE #205	2 3 STREET ADDRESS 1414 N.W. 107 AVE.-SUITE 215
CITY ST ZIP	MIAMI FL	2 4 CITY ST ZIP MIAMI FLA 33172-2741
TITLE	SD	3 1 TITLE ☑ Change ☐ Addition
NAME	ERICKSON, G. C.	3 2 NAME
STREET ADDRESS	1414 N.W. 107TH AVE #205	3 3 STREET ADDRESS 1414 N.W. 107 AVE.-SUITE 215
CITY ST ZIP	MIAMI FL	3 4 CITY ST ZIP MIAMI FLA 33172-2741
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)(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] A.R. SCOTT 4-3-95 3055932584
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

0196168 CP