

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 21 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L91222 (4)

1. Corporation Name
PUNCT-US, INC.

Principal Place of Business
1350 E. NEWPORT CENTER DR.
#206
DEERFIELD BEACH FL 33442

Mailing Address
1350 E. NEWPORT CENTER DR.
#206
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/01/1990	3a. Date of Last Report 04/21/1994
4. FEI Number 65-0264892	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	

2. Principal Place of Business 21 1400 E. Newport Ctr. Dr. Suite, Apt. #, etc. 22 209 City & State 23 Deerfield Beach, FL Zip Country 24 33442 25 USA	2a. Mailing Address 26 1400 E. Newport Ctr. Dr. Suite, Apt. #, etc. 27 209 City & State 28 Deerfield Beach, FL Zip Country 29 33442 30 USA
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9. Name and Address of Current Registered Agent

KAY, JAMES R.
2000 PALM BEACH LAKES BLVD.
STE. 900
W. PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83 Suite 1002	
84 City	FL

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] DATE: [Date]

1350 E. NEWPORT CENTER DR.
DEERFIELD BEACH FL

TITLE	DR.	21 NAME	1400 E. Newport Center Dr. #209
NAME	REIDUNG, LORENZ	22 NAME	
STREET ADDRESS	1350 E NEWPORT CNTR #206	23 STREET ADDRESS	1400 E. Newport Center Dr. #209
CITY-ST-ZIP	DEERFIELD BEACH FL	24 CITY-ST-ZIP	

TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	

TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	

TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	

TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(g), 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 incorporator 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 as an authorized agent with an address.

SIGNATURE: [Signature] DATE: March 3, 1995 305/284581
[Signature] REIDUNG
[Signature] REIDUNG