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 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M12587** **(5)**

1. Corporate Name
GOLUB & ASSOCIATES, INC.

Principal Place of Business
10920 S.W. 84TH COURT
MIAMI FL 33156

Mailing Address
10920 S.W. 84TH COURT
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/13/1985**
3a. Date of Last Report: **03/18/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite/Apt. # etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 25 / 29 / 30

4. FEI Number: **59-2504970** ☐ 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. Is the corporation authorized to do business in [illegible] Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GOLUB, RICHARD
10920 S.W. 84TH COURT
MIAMI FL 33156

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 Section 607.1008, 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

12. OFFICERS AND DIRECTORS

TITLE: PD
NAME: GOLUB, RICHARD M.
STREET ADDRESS: 10920 S.W. 84TH CT
CITY ST ZIP: MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY ST ZIP

☐ Change ☐ Addition
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CITY ST ZIP

14. I hereby certify that the information supplied with this filing is true and accurate. For profit corporations only: I further certify that the information indicated on this 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: Richard M. Golub 5/7/95 305 274-2102
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
RICHARD M. GOLUB

0100726 CP