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

FILED
95 JUL 31 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M16934** **(5)**

1. Corporation Name
BETHESDA BUILDING CORP.

Principal Place of Business	Mailing Address
% MURIEL KING 3405 N W 17TH AVE. MIAMI FL 33142	% MURIEL KING 3485 N W 17TH AVE. MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/19/1985	3a. Date of Last Report: 08/01/1994
4. FEI Number: 59-2758887	☐ 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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KING, MURIEL F. 3485 N W 17TH AVE. MIAMI FL	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 607.0502 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when mandatory

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P/D	☐ Change ☒ Addition
NAME	KING, FREDERICK GEORGE	12 NAME	KING,FREDERICK GEORGE	
STREET ADDRESS	1775 N E 144TH ST.	13 STREET ADDRESS	1775 N.E. 144th St.	
CITY-ST-ZIP	N. MIAMI FL	14 CITY ST ZIP	N. Miami, Fl	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	KING, MURIEL F.	22 NAME		
STREET ADDRESS	1775 N E 144TH ST.	23 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI FL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☒ Change ☐ Addition
NAME	EDWARDS, BARBARA RUTH	32 NAME		
STREET ADDRESS	1775 NE 144 STREET	33 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☒ Change ☐ Addition
NAME	KING, DONOVAN JOSEPH	42 NAME		
STREET ADDRESS	1775 N E 144TH ST.	43 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI FL	44 CITY ST ZIP		
TITLE	D	51 TITLE		☒ Change ☐ Addition
NAME	KING, MICHAEL ARTHUR	52 NAME		
STREET ADDRESS	1775 N E 144TH ST.	53 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI FL	54 CITY ST ZIP		
TITLE	D	61 TITLE		☒ Change ☐ Addition
NAME	PHILLIPS, DENISE E.	62 NAME		
STREET ADDRESS	1775 N E 144TH ST	63 STREET ADDRESS		
CITY-ST-ZIP	N. MIAMI FL	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 119.07(3)(i), 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: _____ Date _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

0153204 CP