

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
95 AUG -7 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # M29871 (4)

1. Corporation Name

ERNEST E. HUSTON & ASSOCIATES, INC.

Principal Place of Business

5200 N. FEDERAL HWY #2
FT. LAUDERDALE FL 33308

Mailing Address

5200 N. FEDERAL HWY #2
FT. LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/01/1986

3a. Date of Last Report

01/10/1995

4. FEI Number

59-2682015

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. 109.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

TALESMAN, CRAIG
800 CORPORATE DRIVE
#3B
FT. LAUDERDALE FL 33311

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 607.0502 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, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSDT
HUSTON, ERNEST E
1800 N. ANDREWS AVE., #3B
FT. LAUDERDALE FL

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

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31 TITLE
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41 TITLE
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51 TITLE
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54 CITY - ST - ZIP

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61 TITLE
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64 CITY - ST - ZIP

☐ Change ☐ Addition

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)(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Page 4