# 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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 AM 11:26

DOCUMENT # **M44927** **(5)**

1. Corporate Name
**IRIS VAC & SEW, INC.**

Principal Place of Business
**5521 N.W. 180 TERR.**
**MIAMI FL 33055**

Mailing Address
**5521 N.W. 180 TERR.**
**MIAMI FL 33055**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/16/1987**
3a. Date of Last Report: **07/19/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: **59-2755954** — Applied For ☐ Not Applicable ☐

Country — 22
Suite, Apt. #, PO — 27
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23
City & State — 28
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24
County — 25
Zip — 29
Country — 30
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

**TARRADELL, EUSEBIO**
**4840 N.W. 184 TERR.**
**MIAMI FL 33055**

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 607.0501 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(s)

12. OFFICERS AND DIRECTORS

Title
Name
Street Address
City-State-Zip

**PSTD**
**MANTELLE, CARMEN**
**5521 N.W. 180 TERR.**
**MIAMI FL**

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

Title ☐ Change ☐ Addition
Name
Street Address
City-State-Zip

I hereby certify that the information supplied with this report is true, complete, and accurate.

SIGNATURE: X Carmen Mantelle 1/6/93
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0102267 CP