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 APR 17 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M47454** **(7)**

1. Corporation Name
ANNIE BARTHELEMY, INC.

Principal Place of Business
~~5801 NORTH BAY ROAD~~
~~MIAMI BEACH FL 33140~~
US

Mailing Address
~~C/O HUGHES & SILVERS~~
~~1141 KANE CONCOURSE~~
~~BAY HARBOR ISLANDS FL 33154-2012~~
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/27/1987
3a. Date of Last Report: 02/01/1994

2. Principal Place of Business
21 % HUGHES SILVERS + GLASSMAN
Suite, Apt. #, etc.
22 1140 KANE CONCOURSE - 5th FLR.
City & State
23 BAY HARBOR ISLANDS, FL
24 33154 25 County

2a. Mailing Address
26 % HUGHES SILVERS + GLASSMAN
Suite, Apt. #, etc.
27 1140 KANE CONCOURSE - 5th FLR.
City & State
28 BAY HARBOR ISLANDS, FL [redacted]
29 33154 30 County

4. FEI Number: 59-2794899 — Applied For / Not Applicable

5. Certificate of Status Desired: [X] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: [ ] $5.00 May Be Added to Fees

8. This Corporation has filed for a digital tax under S. 199.032, Florida Statutes: [ ] Yes [X] No

9. Name and Address of Current Registered Agent
SILVERS, ROBERT HENRY
~~HUGHES & SILVERS~~
~~1141 KANE CONCOURSE~~
~~BAY HARBOR ISLANDS FL 33154~~

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): % HUGHES SILVERS + GLASSMAN
83 1140 KANE CONCOURSE - 5th FLR.
84 City: BAY HARBOR ISLANDS FL 85 Zip Code: 33154

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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BARTHELEMY, PATRICK
STREET ADDRESS	~~9700 COLLINS AVE.~~
CITY ST ZIP	~~BAL HARBOUR FL~~
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change [ ] Addition
12 NAME	
13 STREET ADDRESS	% HUGHES SILVERS + GLASSMAN
14 CITY ST ZIP	1140 KANE CONCOURSE BAY HARBOR ISLANDS FL 33154
21 TITLE	[ ] Change [ ] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	[ ] Change [ ] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	[ ] Change [ ] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	[ ] Change [ ] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	[ ] Change [ ] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. I 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)(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 this 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 attached sheet with an address.

SIGNATURE: X PATRICK BARTHELEMY 4-12-95 305-864-7531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0204012 CP