

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 12:30

DOCUMENT # M50822 (9)

1. Corporation Name

ASSOCIATED GIFT SHOPS #4, INC.

Principal Place of Business

104 CRANDON BLVD STE 412
KEY BISCAYNE FL 33149

Mailing Address

104 CRANDON BLVD STE 412
KEY BISCAYNE FL 33149

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/23/1987

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21. SAME AS MAILING ADDRESS 27. 799 Brickell Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. #900

23. Zip Country

28. Miami, FL

24. Zip Country

29. 33131 30. Date

4. FEI Number
59-2835358

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 ☒

9. Name and Address of Current Registered Agent

GREAVES, GARY C
104 CRANDON BLVD STE 412
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent

81. Name
Joseph J. Weisenfeld
82. Street Address (P.O. Box Number is Not Acceptable)
799 Brickell Plaza #900
83.
84. City
Miami, FL
85. Zip Code
33131

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 Sections 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
D
RUSTIN, HAROLD
550 OCEAN DR.
KEY BISCAYNE FL
D
GREAVES, GARY C.
10415 S.W. 87TH AVENUE
MIAMI FL

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REMITTED BY MAY 1

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)(a), 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:

Harold Rustin
Harold Rustin

4-27-95

305-365-0944