

LE 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

DOCUMENT # **M62775** (5)

1. Corporation Name

P.S. HANU GROUP INC.

95 MAY -1 AM 8:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**175 FOUNTAINBLEAU BLVD., SUITE 1-D
MIAMI FL 33172**

Mailing Address

**175 FOUNTAINBLEAU BLVD., SUITE 1-D
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/19/1987

3a. Date of Last Report
08/04/1994

4. FEI Number
65-0039805

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

21. Suite, Apt. #, etc.

22. City & State

23. Zip

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

**GRIMALDI, NINA
175 FOUNTAINBLEAU BLVD., SUITE 1-D
MIAMI FL 33172**

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or person authorized to act as registered agent)

(Signature of Registered Agent or person authorized to act as registered agent)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	GRIMALDI, ANTHONY
STREET ADDRESS	175 FOUNTAINBLEAU BLVD., SUITE 1-D
CITY, ST, ZIP	MIAMI BEACH FL 33172
TITLE	ST
NAME	RAMLAKHAN, JAGLAL
STREET ADDRESS	175 FOUNTAINBLEAU BLVD., SUITE 1-D
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	CT
NAME	ROOPNARINE, RAJKUMAR
STREET ADDRESS	175 FOUNTAINBLEAU BLVD., SUITE 1-D
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	CT	☒ Change ☐ Addition
1.2 NAME	GRIMALDI, ANTHONY	
1.3 STREET ADDRESS	175 FOUNTAINBLEAU BLVD, STE 1-D	
1.4 CITY, ST, ZIP	MIAMI, FLORIDA 33172	☐ Change ☐ Addition
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE	P	☒ Change ☐ Addition
3.2 NAME	ROOPNARINE RAJKUMAR	
3.3 STREET ADDRESS	175 FOUNTAINBLEAU BLVD, STE 1-D	
3.4 CITY, ST, ZIP	MIAMI, FLORIDA 33172	☐ Change ☐ Addition
4.1 TITLE		
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 130.07(4)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or person empowered to remedy this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes or new attachments with addresses.

SIGNATURE:

Anthony Grimaldi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ANTHONY GRIMALDI-CT

4-27-95

305-226-5260