FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

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 MAY -1 AM 8:40

DOCUMENT # N93000001397 (9)

1. Corporation Name
ANTIQUE CLUB OF HOLLYWOOD, INC.

Principal Place of Business	Mailing Address
1820 N.E. 163RD ST. N MIAMI BEACH FL 33162	1820 N.E. 163RD ST. N MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/26/1993
3a. Date of Last Report: 03/21/1994
4. FEI Number: 65-0429483 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 3610 N 52 AVE	26 3610 N 52 AVE
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 HOLLYWOOD, FL
City & State 23 Hollywood FL	City & State 28 33021 U.S.A.
Zip 24 33021 Country 25 USA	Zip 29 Country 30

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ZEDECK, DAVID L
1820 N.E. 163RD ST.
N MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name RONALD J. WALTERS
82 Street Address (P.O. Box Number is Not Acceptable) 8415 W McNAB Rd.
83
84 City TAMARAC FL 85 Zip Code 33321

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 RONALD J. WALTERS — 4-29-95
Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE		☐ Change ☐ Addition
NAME	SCHIMMEL, PAULA	12 NAME		
STREET ADDRESS	3610 NORTH 52ND AVE.	13 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	14 CITY-ST-ZIP		
TITLE	S	21 TITLE	DIRECTOR - D	☑ Change ☐ Addition
NAME	BURNS, VIOLA	22 NAME		
STREET ADDRESS	2031 POLK ST	23 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	24 CITY-ST-ZIP		
TITLE	T	31 TITLE	DIRECTOR - D	☑ Change ☐ Addition
NAME	AXELROD, DENA	32 NAME		
STREET ADDRESS	4551 NW 67 TERR	33 STREET ADDRESS		
CITY-ST ZIP	LAUDERHILL FL	34 CITY-ST-ZIP		
TITLE	VP	41 TITLE	DIRECTOR - D	☑ Change ☐ Addition
NAME	STOLTZ, SYLVIA	42 NAME		
STREET ADDRESS	1201 SOUTH OCEAN DR.	43 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☑ Change ☐ Addition
NAME	BURNS, VIOLA	52 NAME		
STREET ADDRESS	2031 POLK ST.	53 STREET ADDRESS	REMOVE	
CITY ST ZIP	HOLLYWOOD FL 33020	54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS	REMITTED BY MAY 1	
CITY ST ZIP		64 CITY-ST-ZIP		

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 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paula Schimmel — 4/19/95 — 305-926-1060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0043779