

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 10:29

DOCUMENT # P31115

(9)

1. Corporation Name

C. M. GENERAL, INC.

Principal Place of Business

Mailing Address

%UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH ST., SUITE 300
NORHT MIAMI FL 33162

%UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH ST., SUITE 300
NORHT MIAMI FL 33162

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/28/1990

3a. Date of Last Report

05/10/1994

4. FEI Number

98-0113232

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET, SUITE 300
NORTH MIAMI BEACH FL 33162

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PRUSIEWICZ, BOB
STREET ADDRESS CHASE BANK, 350 PARK AVE., 11TH FLOOR
CITY-ST-ZIP NEW YORK NY 10022

1.1 TITLE VP & Sole Director ☒ Change ☐ Addition
1.2 NAME James E. Lewis
1.3 STREET ADDRESS Chase Bank 1211 Ave of Americas, 37th fl
1.4 CITY-ST-ZIP New York, NY 10036

TITLE S
NAME SINGER, LORI
STREET ADDRESS CHASE BANK, 350 PARK AVE., 11TH FLOOR
CITY-ST-ZIP NEW YORK NY 10022

2.1 TITLE President ☒ Change ☐ Addition
2.2 NAME Samuel T. Castlenan
2.3 STREET ADDRESS Chase Bank 1211 Ave. of Americas, 32nd fl
2.4 CITY-ST-ZIP New York, NY 10036

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Secretary ☐ Change ☐ Addition
3.2 NAME Koon-Ping Chan
3.3 STREET ADDRESS Chase Bank 1211 Ave of Americas, 37th fl
3.4 CITY-ST-ZIP New York, NY 10036

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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 the corporation or the recorder 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: *Koon-Ping Chan* Koon-Ping Chan, Secretary

2/9/95

(212)
789-7870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Typed)