

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 11:18

DOCUMENT # P92000001657 (5)

1. Corporation Name

MATACUMBE ENTERPRISES, INC.

Principal Place of Business

3301 BONGE DE LEON BLVD.
SUITE 200
CORAL GABLES FL 33134

Mailing Address

1 SE 3RD AVE
SUITE 2120
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 10/29/1992 3a. Date of Last Report 03/07/1994

4. FEI Number 65-0370869 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 1048 Kane Concourse 2a. Mailing Address 26 1048 Kane Concourse

Suite, Apt. #, etc. 22 2B 27 2B

City & State 23 Bay Harbor Fl 28 Bay Harbor Fl

Zip 24 33154 25 Dade 29 33154 30 Dade

9. Name and Address of Current Registered Agent

GADINSKY, SETH
1 SE 3RD AVE.
SUITE 2120
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 1048 Kane Concourse
84 2B Bay Harbor FL 85 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

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

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	GADINSKY, SETH
STREET ADDRESS	1 SE 3RD ST., 21ST FLOOR
CITY-ST-ZIP	MIAMI FL 33131-2360
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	1048 Kane Concourse, 2B	
13 STREET ADDRESS	Bay Harbor, Fl 33154	
14 CITY-ST-ZIP		☐ Change ☐ Addition
21 TITLE		
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE		
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		☐ Change ☐ Addition
41 TITLE		
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE		
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE		
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does, and equally for the corporation stated in Sections 199.032, 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, 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:

Seth Gadinsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/95

Seth Gadinsky