

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

CORPORATION
ANNUAL REPORT
1995



OFFICIAL EXHIBITS OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

55 MAY -1 1995

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000002959 (3)

1. Corporation Name

HY-SAVE OF SOUTH FLORIDA, INC.

Principal Officer - Treasurer

% SCOTT GORDON
3000 N.W. 77 COURT
MIAMI FL 33122

Principal Officer - Secretary

% SCOTT GORDON
3000 N.W. 77 COURT
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated - Quarter	3a. Date of Last Report
01/13/1993	02/15/1994
4. FEI Number	Applied For
65-0385147	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contributions	
☐	
8. Does corporation have liability for intangible tax under 1991 (FS) Florida Statutes	☐ Yes ☒ No

2. Director, President, or Executive Officer	2a. Managing Agent
21. Name	26. Name
22. Address	27. Address
23. City	28. City
24. State	29. State
25. Zip	30. Zip

9. Name and Address of Current Registered Agent

WAKS, DEBORAH R
11326 S.W. 114 LANE CIRCLE
MIAMI FL 33176

10. Name and Address of New Registered Agent

81. Name	Gordon Scott
82. Street Address (P.O. Box Number is Not Acceptable)	3000 N.W. 77 Ct.
83. City	Miami
84. State	FL
85. Zip Code	33122

11. I, the undersigned, the President, Secretary, Treasurer, or Managing Agent of the corporation, hereby certify that the information supplied with this report is voluntarily furnished and does not comply for the incorporation and has been filed in accordance with the Florida Statutes. I further certify that the information supplied with this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and made under oath. I am an officer or director of the corporation or the person or persons empowered to make up the report as required by Chapter 193, Florida Statutes, and that my name appears in Block 1 of the report or on an attached sheet with an address.

12. OFFICERS AND DIRECTORS	13. ADDITIONAL INFORMATION TO OFFICERS AND DIRECTORS
NAME: PD GORDON, SCOTT ADDRESS: 3000 N.W. 77 COURT CITY: MIAMI FL 33122	1. Change ☐ Addition ☐
NAME: VSD GORDON, JOHN ADDRESS: 3000 N.W. 77 COURT CITY: MIAMI FL 33122	2. Change ☐ Addition ☐
NAME: VO Frank T. Robinson ADDRESS: 3000 N.W. 77 Ct CITY: Miami, FL 33122	3. Change ☐ Addition ☐
NAME: [Blank]	4. Change ☐ Addition ☐
NAME: [Blank]	5. Change ☐ Addition ☐
NAME: [Blank]	6. Change ☐ Addition ☐
NAME: [Blank]	7. Change ☐ Addition ☐
NAME: [Blank]	8. Change ☐ Addition ☐
NAME: [Blank]	9. Change ☐ Addition ☐
NAME: [Blank]	10. Change ☐ Addition ☐
NAME: [Blank]	11. Change ☐ Addition ☐
NAME: [Blank]	12. Change ☐ Addition ☐
NAME: [Blank]	13. Change ☐ Addition ☐
NAME: [Blank]	14. Change ☐ Addition ☐
NAME: [Blank]	15. Change ☐ Addition ☐
NAME: [Blank]	16. Change ☐ Addition ☐
NAME: [Blank]	17. Change ☐ Addition ☐
NAME: [Blank]	18. Change ☐ Addition ☐
NAME: [Blank]	19. Change ☐ Addition ☐
NAME: [Blank]	20. Change ☐ Addition ☐

14. I, the undersigned, hereby certify that the information supplied with this report is voluntarily furnished and does not comply for the incorporation and has been filed in accordance with the Florida Statutes. I further certify that the information supplied with this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and made under oath. I am an officer or director of the corporation or the person or persons empowered to make up the report as required by Chapter 193, Florida Statutes, and that my name appears in Block 1 of the report or on an attached sheet with an address.

SIGNATURE: Scott Gordon
1/26/95 305-512-2251