

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra D. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 AM 11:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000019726 (7)**

1. Corporation Name  
**LEFTY SALES, INC.**

Principal Place of Business      Mailing Address  
**3900 N.E. 18TH AVE.  
FORT LAUDERDALE FL 33334**      **3900 N.E. 18TH AVE.  
FORT LAUDERDALE FL 33334**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**03/16/1993**      **05/01/1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21	<b>1230 Middle River Dr</b>	26	<b>1230 Middle River Dr</b>	<b>65-0398814</b>		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23	<b>Ft Lavo FL</b>	28	<b>Ft Lavo FL</b>				
24	Zip <b>33304</b>	25	Country <b>USA</b>	29	Zip <b>33304</b>	30	Country <b>USA</b>

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>ASKINAS, DANIEL A 3900 N.E. 18TH AVENUE FT. LAUDERDALE FL 33334</b>				81	Name <b>ASKINAS, Daniel A</b>		
				82	Street Address (P.O. Box Number is Not Acceptable) <b>1230 Middle River Drive</b>		
				83			
				84	City <b>Ft Lauderdale FL</b>	85	Zip Code <b>33304</b>

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 *Daniel A. Askinas*      DATE **4/26/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DP</b>	1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ASKINAS, DANIEL A</b>	12. NAME	<b>ASKINAS, Daniel A</b>
STREET ADDRESS	<b>3900 N.E. 18TH AVE.</b>	13. STREET ADDRESS	<b>1230 MIDDLE RIVER DR</b>
CITY - ST - ZIP	<b>FT LAUDERDALE FL 33334</b>	14. CITY - ST - ZIP	<b>FT LAUD FL 33304</b>
TITLE		21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY - ST - ZIP		24. CITY - ST - ZIP	
TITLE		31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY - ST - ZIP		34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
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)(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 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: *Daniel A. Askinas*      DATE: **4/26/95**      ID: **305 564 4384**