

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 FEB 17 PM 4: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000020235 (6)

1. Corporation Name

GARI MARKETING, INC.

Principal Place of Business

% REBECCA YORE
645 NE 173RD TER
NORTH MIAMI BEACH FL 33162

Mailing Address

% REBECCA YORE
645 NE 173RD TER
NORTH MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/18/1993

3a. Date of Last Report

02/23/1994

4. FEI Number

65-0400948

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 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

PERLOW, JEFFREY M
1820 E HALLANDALE BEACH BLVD
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

12. 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 reconstituting)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	DE ROSENBLATT, CELIA
STREET ADDRESS	645 NE 173RD TER
CITY, ST, ZIP	N MIAMI BEACH FL
TITLE	VPT
NAME	ROSENBLATT, SALO
STREET ADDRESS	645 NE 173RD TER
CITY, ST, ZIP	N MIAMI BEACH FL
TITLE	VP
NAME	ROSENBLATT, TANIA
STREET ADDRESS	645 NE 173RD TER
CITY, ST, ZIP	N MIAMI BEACH FL
TITLE	VP
NAME	ROSENBLATT, ESTELA
STREET ADDRESS	645 NE 173RD TER
CITY, ST, ZIP	N MIAMI BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	800001410408
1.3 STREET ADDRESS	-02/20/95--01061--023
1.4 CITY, ST, ZIP	****200.00 ****200.00
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 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 110.07(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 in an attachment with an address.

SIGNATURE: CELIA DE ROSENBLATT Celia de Rosenblatt 2/2/95 6515415

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Typed Name)