

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sarah B. Morikane
Secretary of State
Division of Corporations

DOCUMENT # P93000034155 (0)

Incorporation State

RICHARD A. KURTZ, INC.

APPROVED
AND
FILED

95 MAY 23 11:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1081 NORTHWEST 19TH COURT
FORT LAUDERDALE FL 33311

1081 NORTHWEST 19TH COURT
FORT LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1993

3a. Date of Last Report

04/29/1994

2. Principal Place of Business

2b. Mailing Address

21. State Apt. # etc.

26. State Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

25. City & State

30. City & State

4. FEI Number

NOT APPLICABLE

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 authority for management and control by the
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HULL, FLOYD V JR.
1040 BAYVIEW DRIVE
STE. 426
FORT LAUDERDALE FL 33304-2592

81. Name

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

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0607 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 collection of \$5.00 on 607.1505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. NAME

D

KURTZ, RICHARD A
1081 NORTHWEST 19TH COURT
FORT LAUDERDALE FL 33311

15. NAME

16. STREET ADDRESS

17. CITY, STATE, ZIP

18. NAME

19. STREET ADDRESS

20. CITY, STATE, ZIP

21. NAME

22. STREET ADDRESS

23. CITY, STATE, ZIP

24. NAME

25. STREET ADDRESS

26. CITY, STATE, ZIP

27. NAME

28. STREET ADDRESS

29. CITY, STATE, ZIP

30. NAME

31. STREET ADDRESS

32. CITY, STATE, ZIP

33. NAME

34. STREET ADDRESS

35. CITY, STATE, ZIP

36. NAME

37. STREET ADDRESS

38. CITY, STATE, ZIP

39. NAME

40. STREET ADDRESS

41. CITY, STATE, ZIP

42. NAME

43. STREET ADDRESS

44. CITY, STATE, ZIP

45. NAME

46. STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

5-1-95-305467

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0220124 CP