

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

50 MAY -1 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000034247 (5)

1. Corporation Name

CPR WORKS, INC.

2. Principal Place of Business

680 N. FIG TREE LANE
PLANTATION FL 33317

3. Mailing Address

680 N. FIG TREE LANE
PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Changed
05/05/1993

3a. Date of Last Report
05/01/1994

4. FEI Number
65-0411337

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

7. This corporation has business for incorporation under: ☐ 1993/1992 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. State of Incorporation

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9. Name and Address of Current Registered Agent

MACINTOSH, GARY L
680 N. FIG TREE LANE
PLANTATION FL 33317

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

FL

85. Zip Code

11. I, the undersigned, the president of Section 1907(2)(a) and 1908, Florida Statutes, have caused this corporation to submit this statement for the purpose of changing its registered office to the address set forth 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 not a resident of the State of Florida. I am not a resident of the State of Florida.

Signature

Signature of New Registered Agent (if applicable)

Date

12. OFFICERS AND DIRECTORS

1. NAME
D
MACINTOSH, GARY L
680 N. FIG TREE LANE
PLANTATION FL 33317
2. NAME
D
MACINTOSH, JOANNE M
680 N. FIG TREE LANE
PLANTATION FL 33317

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS, IN 12.

1. NAME ☐ Change ☐ Addition
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1907(2)(b), Florida Statutes. I further certify that the information submitted 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. I am an officer or director of this corporation or the receiver or liquidator empowered to execute this report as required by Chapter 190, Florida Statutes, and that my name appears on the filing of this report.

SIGNATURE: Gary L. Macintosh Pres.

GARY L. MACINTOSH

4/20/95 305 5872412