**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**
**AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)**

PROFIT CORPORATION ANNUAL REPORT
**1995**

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

FILED
95 JUL 21 PM 12:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P93000038834 (6)**

1. Corporation Name
**ASHFIELD VENTURES, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 530 N.W. 106 TERRACE<br>PEMBROKE PINES FL 33026 | 530 N.W. 106 TERRACE<br>PEMBROKE PINES FL 33026 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/01/1993
3a. Date of Last Report: 08/10/1994

2. Principal Place of Business
21: 2060 SW 71 Terr. F-5
22: Suite, Apt. #, etc.
23: City & State: Davie, Fl
24: Zip: 33317
25: Country: Broward

2a. Mailing Address
26: 20720 NW 3 Street
27: Suite, Apt. #, etc.
28: City & State: Pembroke Pines, Fl
29: Zip: 33029
30: Country: Broward

4. FEI Number: 65-0414045 ☐ 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

9. Name and Address of Current Registered Agent

IBARRA, ANA M
530 N.W. 106 TERRACE
PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent

81 Name: JANET SIMMONS
82 Street Address (P.O. Box Number is Not Acceptable): 20720 NW 3 Street
83:
84 City: Pembroke Pines FL 85 Zip Code: 33029

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: Janet Simmons — JANET SIMMONS — DATE: June 27, 1995
(Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (A-J) | |
|---|---|---|---|
| TITLE | PD | 11 TITLE | PD ☒ Change ☐ Addition |
| NAME | WRIGHT, VIRGINIA | 12 NAME | JANET SIMMONS |
| STREET ADDRESS | 530 N.W. 106 TERRACE | 13 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33026 | 14 CITY-ST-ZIP | Pembroke Pines, Fl 33029 |
| TITLE | VD | 21 TITLE | VD ☒ Change ☐ Addition |
| NAME | IBARRA, ANA M | 22 NAME | DAVID REYES |
| STREET ADDRESS | 530 N.W. 106 TERRACE | 23 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33026 | 24 CITY-ST-ZIP | Pembroke Pines, Fl 33029 |
| TITLE | SD | 31 TITLE | SD ☐ Change ☐ Addition |
| NAME | HOOKS, D. MICHAEL | 32 NAME | D. MICHAEL HOOKS |
| STREET ADDRESS | 20720 N.W. 3 STREET | 33 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33029 | 34 CITY-ST-ZIP | Pembroke Pines, Fl 33029 |
| TITLE | TD | 41 TITLE | TD ☒ Change ☐ Addition |
| NAME | REYES, DAVID | 42 NAME | ARVONNA BROWN |
| STREET ADDRESS | 20720 N.W. 3 STREET | 43 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33029 | 44 CITY-ST-ZIP | Pembroke Pines, Fl 33029 |
| TITLE | D | 51 TITLE | D ☒ Change ☐ Addition |
| NAME | BROWN, ARVONNA | 52 NAME | ANA MC GRARTY |
| STREET ADDRESS | % 530 N.W. 106 TERRACE | 53 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33026 | 54 CITY-ST-ZIP | Pembroke Pine, Fl 33029 |
| TITLE | D | 61 TITLE | D ☒ Change ☐ Addition |
| NAME | SIMMONS, JANET | 62 NAME | VIRGINIA WRIGHT |
| STREET ADDRESS | % 530 N.W. 106 TERRACE | 63 STREET ADDRESS | 20720 NW 3 Street |
| CITY-ST-ZIP | PEMBROKE PINES FL 33026 | 64 CITY-ST-ZIP | Pembroke Pines, Fl 33029 |

CR2E034 (3/95)

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)(i), 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:** D. Michael Hooks — D. MICHAEL HOOKS — SD — 6-27-95 — 305-475-0305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

0024045 CP