

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 JUL -3 AM 8:39

DOCUMENT # P93000050890 (1)

1. Corporation Name

MINDSET, INC.

Principal Place of Business
**7275 MANASOTA KEY RD.
 ENGLEWOOD FL 34223**

Mailing Address
**7275 MANASOTA KEY RD.
 ENGLEWOOD FL 34223**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/20/1993	3a. Date of Last Report 04/29/1994
4. FEI Number 00-7246724-65-0486306	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 liability for information for under s. 194.022 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

**BERNSTEIN, LYNN R
 7275 MANASOTA KEY ROAD
 ENGLEWOOD FL 34223**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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

Signature of person changing name, Registered agent and the applicable

agent Registered Agent Signature request when necessary

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	1.1 TITLE	☐ Change ☐ Addition
NAME	BERNSTEIN, JOSEPH S	1.2 NAME	
STREET ADDRESS	7275 MANASOTA KEY RD.	1.3 STREET ADDRESS	
CITY, ST, ZIP	ENGLEWOOD FL 34223	1.4 CITY, ST, ZIP	
TITLE	DVI	2.1 TITLE	☐ Change ☐ Addition
NAME	BERNSTEIN, LYNN R	2.2 NAME	
STREET ADDRESS	7275 MANASOTA KEY RD.	2.3 STREET ADDRESS	
CITY, ST, ZIP	ENGLEWOOD FL 34223	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), 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:

Joseph S. Bernstein
 AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOSEPH S. BERNSTEIN

6/28/95
 Date

Signature of State

CR2E034 (3/95)