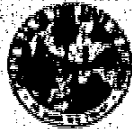


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P93000065956 (3)

1. Corporation Name

MEDLEY CANAL COMPANY

Principal Place of Business

**12101 SW 93 AVENUE
MIAMI FL 33176**

Mailing Address

**11921 S. DIXIE HWY
STE. 201
MIAMI FL 33156
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/16/1993

3a. Date of Last Report

07/01/1994

4. FEI Number

65-0439724

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

11921 S. Dixie Hwy

2a. Mailing Address

Suite, Apt. #, etc.

Suite 201

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33156

Country

USA

Zip

33156

Country

USA

9. Name and Address of Current Registered Agent

**FEDIE, AINSLEE R
717 PONCE DE LEON BLVD #215
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

ANTHONY ASKOWITZ

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

11921 S. Dixie Hwy Suite 201

83

84 City

Miami

FL

85 Zip Code

33156

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]

(NOTE: Registered Agent signature required when reappointing)

DATE

4/27/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ASKOWITZ, GERALD
STREET ADDRESS	12101 SW 93 AVENUE
CITY - ST - ZIP	MIAMI FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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 on an attachment with an address.

SIGNATURE:

[Signature] **GERALD ASKOWITZ**

DATE

4/27/95

TELEPHONE #

251-2127