FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:34

DOCUMENT # P93000073720 (3)

1. Corporate Name
BOCAGULF, INC.

Principal Place of Business
199 NW 28 ST
BOCA RATON FL 33432

Mailing Address
199 NW 28 ST
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/25/1993
3a. Date of Last Report: 05/01/1994

2. Federal Employer Identification
21
2a. Mailing Address
26

4. FEI Number: APPLIED FOR 65-0488669
☐ Applied For ☐ Not Applicable

22 State Applied
27 State Applied

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

23 City, State
28 City, State

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

24 City
25 State
29 City
30 State

8. Does corporation have liability for intangible tax under Ch. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
EASTHAM, JOHN K JR.
138 W PALMETTO PARK RD
BOCA RATON FL 33432

10. Name and Address of New Registered Agent
81 Name
82 Street Address P.O. Box Number Not Acceptable
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The name and address of its registered office and the name and address of its registered agent in Florida are as follows:

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	P
Name	TOBIAS, JAMES A
Street Address	10900 FOX GLEN DR.
City, State, Zip	BOCA RATON FL 33428
Title	V
Name	TOBIAS, ROBERT R
Street Address	10793 58TH RD. S.
City, State, Zip	LAKE WORTH FL 33467
Title	ST
Name	TOBIAS, RONALD J
Street Address	22830 PONDEROSA DR.
City, State, Zip	BOCA RATON FL 33428
Title	D
Name	EASTHAM, JOHN K JR
Street Address	138 W. PALMETTO PARK RD.
City, State, Zip	BOCA RATON FL 33432

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Add

REMITTED BY MAY 1

14. I hereby certify that the information supplied with the filing complies with the requirements of Section 607.0505, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall constitute an affirmation under the penalties of perjury that I have read the foregoing document and that the facts stated therein are true.

SIGNATURE: James A Tobias Pres 4.21.95 407-392-0591
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES A. TOBIAS PRESIDENT

0256719 CP