FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 31 AM 9:23

DOCUMENT # **P93000088061 (5)**

1. Corporation Name
YFFUD ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2014 FOURTH ST SARASOTA FL 34237	2014 FOURTH ST SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/20/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 3256 Cross Creek Dr.
Suite, Apt. #, etc. 22:
City & State 23: SARASOTA Florida
Zip 24: 34231 Country 25: U.S.A.

2a. Mailing Address
26: 3256 Cross Creek Dr.
Suite, Apt. #, etc. 27:
City & State 28: SARASOTA Florida
Zip 29: 34231 Country 30: USA

4. FEI Number: 65-0459883 ☐ 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

JAENSCH, PETER J
2014 FOURTH ST
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name: BRIAN DUFFY
82 Street Address (P.O. Box Number is Not Acceptable): 3256 Cross Creek Dr.
83:
84 City: SARASOTA FL 85 Zip Code: 34231

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: Brian Duffy 23rd MAY 1995
Signature, typed or printed name of registered agent, and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D.	☒ Change ☐ Addition
NAME	DUFFY, BRIAN	12 NAME	DUFFY BRIAN	
STREET ADDRESS	5214 WINDING WAY	13 STREET ADDRESS	3256 CROSS CREEK DR	
CITY-ST-ZIP	SARASOTA FL 34242	14 CITY-ST-ZIP	SARASOTA FLORIDA 34231	
TITLE	D	21 TITLE	D.	☒ Change ☐ Addition
NAME	DUFFY, GERALD	22 NAME	DUFFY GERALD	
STREET ADDRESS	5214 WINDING WAY	23 STREET ADDRESS	3256 CROSS CREEK DR.	
CITY-ST-ZIP	SARASOTA FL 34242	24 CITY-ST-ZIP	SARASOTA FLORIDA 34231	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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 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 added on an attachment with an address.

SIGNATURE: Brian Duffy 23rd May 1995 813 929 2072
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0343141 CP