

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

APPROVED
AND
FILED

95 APR 26 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000001579 (9)

1. Corporation Name

INFINITY CONTROL, INC.

Principal Place of Business

4470 S.W. 89TH STREET
MIAMI FL 33186

Mailing Address

4470 S.W. 89TH STREET
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/05/1994

3a. Date of Last Report

2. Principal Place of Business

21 391 Coral Way

2a. Mailing Address

26 391 Coral Way #300

4. FEI Number

65-0462037

Applied For

Not Applicable

Suite, Apt. #, etc.

22 900

Suite, Apt. #, etc.

27 900

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Miami

City & State

28 Miami FL

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

24 FL

Country

25 USA

Zip

29 33145

Country

30 USA

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GARVETT, FREDRIC M ESQ.
3350 S.W. 27TH AVENUE
ONE GROVE VILLA
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME DEFELICE, THOMAS
STREET ADDRESS 14700 S.W. 89TH STREET
CITY - ST - ZIP MIAMI FL 33186

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE P
12 NAME ROBERT BRANDT
13 STREET ADDRESS 391 CORAL WAY #900
14 CITY - ST - ZIP MIAMI, FL 33145

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

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)(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:

Pres. Robert Brandt

4-6-95

445-6100

(Signature and Title of Officer or Director)

(Date)

(Telephone Number)