

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL 21 PM 5:03

DOCUMENT # P94000005037 (4)

1. Corporation Name

BOLERO ENTERPRISES INC.

800001545428
-07/25/95--01068--009
****225.00 ****225.00

Principal Place of Business

Mailing Address

1970 NW 33RD CT
FT LAUDERDALE FL

1970 NW 33RD CT
FT LAUDERDALE FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

01/21/1994

2. Designated Officer or Officers

2b. Mailing Address

21

26

4. FFI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Certificate of Residency

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

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33309

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33309

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOW, THOMAS
1970 NW 33RD CT
FT LAUDERDALE FL

01 Name

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

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.01(2) 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 Registered Agent or Designated Officer or Director)

(Signature of Registered Agent or Designated Officer or Director)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL INFORMATION TO BE PROVIDED TO THE REGISTERED AGENT

NAME

Designation

Address

City

State

Zip

NAME

Designation

Address

City

State

Zip

NAME

Designation

Address

City

State

Zip

NAME

Designation

Address

City

State

Zip

1. NAME

2. NAME

3. NAME

4. NAME

5. NAME

6. NAME

7. NAME

8. NAME

9. NAME

10. NAME

11. NAME

12. NAME

13. NAME

14. NAME

15. NAME

16. NAME

17. NAME

18. NAME

19. NAME

20. NAME

21. NAME

22. NAME

23. NAME

24. NAME

PRES
THOMAS DOW
1970 NW 33RD CT
FT LAUDERDALE FL 33309

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE: ✓

SIGNATURE AND TITLED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/95

Florida Form 8