

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

**APPROVED
AND
FILED**

95 MAY - 1 AM 10:58

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000008658 (4)

1. Corporation Name

EPI, INC.

Principal Place of Business

**2301 N.W. 33RD CT.
SUITE 102
POMPANO BEACH FL 33069**

Mailing Address

**2301 N.W. 33RD CT.
SUITE 102
POMPANO BEACH FL 33069**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/03/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-0467126

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**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**SHOWALTER, LAURA B
2301 N.W. 33RD CT.
SUITE 102
POMPANO BEACH FL 33069**

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President/Director

☐ Change ☒ Addition

1.2 NAME

David Saloff

1.3 STREET ADDRESS

2301 NW 33rd Court, Suite 102

1.4 CITY - ST - ZIP

Pompano Beach, FL 33069

2.1 TITLE

Director/COO/Exec VP

☐ Change ☒ Addition

2.2 NAME

Walter L. Wasserman

2.3 STREET ADDRESS

2301 NW 33rd Court, Suite 102

2.4 CITY - ST - ZIP

Pompano Beach, FL 33069

3.1 TITLE

Director/Secretary

☐ Change ☒ Addition

3.2 NAME

Thomas Lewis

3.3 STREET ADDRESS

2301 NW 33rd Court, Suite 102

3.4 CITY - ST - ZIP

Pompano Beach, FL 33069

4.1 TITLE

Director

☐ Change ☒ Addition

4.2 NAME

Larry Haimovitch

4.3 STREET ADDRESS

2301 NW 33rd Court, Suite 102

4.4 CITY - ST - ZIP

Pompano Beach, FL 33069

5.1 TITLE

VP MARKETING/Asst. Secretary

☐ Change ☒ Addition

5.2 NAME

David S. Winer

5.3 STREET ADDRESS

2301 NW 33rd Court, Suite 102

5.4 CITY - ST - ZIP

Pompano Beach, FL 33069

6.1 TITLE

VP Sales

☐ Change ☒ Addition

6.2 NAME

Joshua E. Barnum

6.3 STREET ADDRESS

2301 NW 33rd Court Suite 102

6.4 CITY - ST - ZIP

Pompano Beach, FL 33069

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 checked, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/95 305-975-9818