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. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 21 PM 12: 04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P94000009310 (1)

1. Corporation Name

BERNARD SHINDER CONSULTANTS, INC.

Principal Place of Business	Mailing Address
2650 N. MILITARY TRAIL SUITE 230 BOCA RATON FL 33431	2650 N. MILITARY TRAIL SUITE 230 BOCA RATON FL 33431

3. Date Incorporated or Qualified: 02/07/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 22594 MERIDIANA	26 22594 MERIDIANA
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 BOCA RATON FL	City & State 28 BOCA RATON FL
Zip 24 33433 Country 25 USA	Zip 29 33433 Country 30 USA

4. FEI Number: 650475147 ☐ 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

BARBAROSH, MILTON H
18101 DAYBREAK DRIVE
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81 Name: BERNARD SHINDER
82 Street Address (P.O. Box Number is Not Acceptable): 22594 MERIDIANA DR
83
84 City: BOCA RATON FL 85 Zip Code: 33433

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] BERNARD SHINDER, PRES. JULY 18/95
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	D
NAME	BARBAROSH, MILTON H
STREET ADDRESS	18101 DAYBREAK DRIVE
CITY-ST-ZIP	BOCA RATON FL 33496
TITLE	D
NAME	SHINDER, BERNARD
STREET ADDRESS	22594 MERIDIANA DRIVE
CITY-ST-ZIP	BOCA RATON FL 33433
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

1 1 TITLE		☒ Change ☐ Addition
1 2 NAME	RESIGNED JAN 1, 1995	
1 3 STREET ADDRESS		
1 4 CITY-ST-ZIP		
2 1 TITLE		☐ Change ☐ Addition
2 2 NAME		
2 3 STREET ADDRESS		
2 4 CITY-ST-ZIP		
3 1 TITLE	D	☐ Change ☒ Addition
3 2 NAME	ADELE SHINDER	
3 3 STREET ADDRESS	22594 MERIDIANA DR	
3 4 CITY-ST-ZIP	BOCA RATON FL 33433	
4 1 TITLE		☐ Change ☐ Addition
4 2 NAME		
4 3 STREET ADDRESS		
4 4 CITY-ST-ZIP		
5 1 TITLE		☐ Change ☐ Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY-ST-ZIP		
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 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)(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: [signature] BERNARD SHINDER PRESIDENT JULY 18/95 407 750-2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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