

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:24

DOCUMENT # P94000011992 (2)

1. Corporation Name
SUSON, INC.

Principal Place of Business

Mailing Address

8305 CASA DEL LAGO
BOCA RATON FL 33433

P.O. BOX 811392
BOCA RATON FL 33481

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/09/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FFI Number

Applied For
Not Applicable

21. State Apt # etc

26. State Apt # etc

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23. Zip

Country

28. Zip

Country

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

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOLDBERG, YALE Z
8305 CASA DEL LAGO
BOCA RATON FL 33433

81. Name

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

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0503 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 607.0503, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent in Charge)

(Signature of Registered Agent or Registered Agent in Charge)

(Signature)

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. 1. NAME
GOLDBERG, YALE Z
2. STREET ADDRESS
P.O. BOX 811392 N/A
3. CITY, ST, ZIP
BOCA RATON FL 33481

13. 1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

12. 1. NAME
GOLDBERG, B. SUSAN
2. STREET ADDRESS
P.O. BOX 811392 N/A
3. CITY, ST, ZIP
BOCA RATON FL 33481

13. 1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

12. 1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

13. 1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

12. 1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

13. 1. NAME

2. STREET ADDRESS

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3. CITY, ST, ZIP

12. 1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

13. 1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 190.024(9)(b), Florida Statutes. I further certify that the information included 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 its owner or holder 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)

(Signature and Typed on Printed Name of Signing Officer or Director)

5/10/95

402-489224