

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000012070 (6)

1. Corporation Name

305 JEFFERSON AVE. CORP.

Principal Place of Business

305 JEFFERSON AVE.
R-1
MIAMI BEACH FL 33139

Mailing Address

P.O. BOX 190651
MIAMI BEACH FL 33119



2. Principal Place of Business

21 State, Apt., etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt., etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

KARLOCK, MADISON K
305 JEFFERSON AVE R-1
MIAMI BEACH FL 33139

3. Date Incorporated or Qualified
02/08/1994

3a. Date of Last Report
02/01/1995

4. FEI Number
65-0465570

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

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 607.0602 and 607.0603, 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 607.0603, Florida Statutes.

SIGNATURE

Madison Karlock MADISON KARLOCK

1-19-96

12. OFFICERS AND DIRECTORS

1 NAME ☐ DELETE

PDS
KARLOCK, MADISON K
305 JEFFERSON AVE R-1
MIAMI BCH FL

2 NAME ☐ DELETE

3 NAME ☐ DELETE

4 NAME ☐ DELETE

5 NAME ☐ DELETE

6 NAME ☐ DELETE

7 NAME ☐ DELETE

8 NAME ☐ DELETE

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18 NAME ☐ DELETE

19 NAME ☐ DELETE

20 NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 NAME ☐ Change ☐ Addition

2 NAME ☐ Change ☐ Addition

3 NAME ☐ Change ☐ Addition

4 NAME ☐ Change ☐ Addition

5 NAME ☐ Change ☐ Addition

6 NAME ☐ Change ☐ Addition

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14 NAME ☐ Change ☐ Addition

15 NAME ☐ Change ☐ Addition

16 NAME ☐ Change ☐ Addition

17 NAME ☐ Change ☐ Addition

18 NAME ☐ Change ☐ Addition

19 NAME ☐ Change ☐ Addition

20 NAME ☐ Change ☐ Addition

14. I 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)(c), 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. I am an officer or director of the corporation or the registered or trusted, or authorized 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 a block address.

SIGNATURE:

Madison Karlock MADISON KARLOCK

1-19-96

3055320260

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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