

**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. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

1995 AUG -1 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000014939 (0)**

1. Corporation Name

**RON'S TABLE PADS, INC.**

Principal Place of Business

Mailing Address

14233 S.W. 76 STREET  
MIAMI FL 33183

14233 S.W. 76 STREET  
MIAMI FL 33183

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

02/24/1984

4. FEI Number

65-0469512

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



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL, CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

BARBARA A. SYMONS

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

14233 S.W. 76th St.

83

84 City

MIAMI

FL

85 Zip Code

33183

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

SYMONS, RONALD

STREET ADDRESS

14233 S.W. 76 STREET

CITY - ST - ZIP

MIAMI FL 33183

11 TITLE

D, PRES.

Change  Addition

12 NAME

BARBARA A. SYMONS

13 STREET ADDRESS

14233 S.W. 76th St.

14 CITY - ST - ZIP

MIAMI FL 33183

21 TITLE

Change  Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

Change  Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

Change  Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

Change  Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

Change  Addition

62 NAME

63 STREET ADDRESS

64 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 110.07(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:

*Barbara A. Symons*  
BARBARA A. SYMONS

7/20/95 (205) 385-3152  
Title Name

CR2E034 (3/95)