

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 MAY -1 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 99400001652(2)

1. Corporation Name

PERSUT INVESTMENTS INC

Principal Place of Business

Mailing Address

3170 N. FEDERAL HWY #100
LIGHTHOUSE POINT FL 33062

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		4. FB Number		3a. Date of Last Report	
21. Suite, Apt. #, etc.		2b. Suite, Apt. #, etc.		65-0470374		3/2/94	
22. City & State		27. City & State		5. Certificate of Status Desired		Applied For	
23. Zip		28. Zip		6. Election Campaign Financing		Not Applicable	
24. Country		29. Country		Trust Fund Contributor		8.75 Additional Fee Required	
				8. This corporation has liability for intangible tax under S. 199.032.		\$5.00 May Be Added to Fees	
				Florida Statutes		☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DONALD J. SUTTON
3170 N. FEDERAL HWY #100
LIGHTHOUSE POINT FL 33062

81. Name	83. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
84. City	

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 fee if applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS		
TITLE	D. DONALD J. SUTTON	1.1 TITLE	☐ Change ☐ Add: c		
NAME		1.2 NAME			
STREET ADDRESS	SAME	1.3 STREET ADDRESS			
CITY, ST, ZIP		1.4 CITY, ST, ZIP			
TITLE	D.	2.1 TITLE	800001481038		
NAME		2.2 NAME	-05/09/95--01102--012		
STREET ADDRESS		2.3 STREET ADDRESS	***200.00 ***200.00		
CITY, ST, ZIP		2.4 CITY, ST, ZIP			
TITLE	D.	3.1 TITLE	☐ Change ☐ Add: c		
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY, ST, ZIP		3.4 CITY, ST, ZIP			
TITLE		4.1 TITLE	☐ Change ☐ Add: c		
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY, ST, ZIP		4.4 CITY, ST, ZIP			
TITLE		5.1 TITLE	☐ Change ☐ Add: c		
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY, ST, ZIP		5.4 CITY, ST, ZIP			
TITLE		6.1 TITLE	☐ Change ☐ Add: c		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY, ST, ZIP		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 from an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/95