

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

CORPORATION
ANNUAL REPORT
1995



OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA
3900 GUY W. WATKINS BLVD.
TALLAHASSEE, FLORIDA 32310-0001

APPROVED
AND
FILED

95 MAY -1 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000020245

1. Corporation Name:

THE GINGERBREAD MAN IV, INC.

Principal Place of Business

100 SE 2ND ST.

#3600

Miami, FL 33131

Mailing Address

100 SE 2ND ST.

#3600

Miami, FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Ret.

3/16/94

4. FFI Number

Applied for

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.02

Florida Statutes

Yes ☐ No ☒

Yes ☐ No ☒

2. Principal Place of Business

21 1401 Brickell Ave.

Suite, Apt. #, etc.

22 #700

City & State

23 Miami, FL

Zip

24 33131

Country

25 US

28. Mailing Address

26 1401 Brickell Ave.

Suite, Apt. #, etc.

27 #700

City & State

28 Miami, FL

Zip

29 33131

Country

30 US

9. Name and Address of Current Registered Agent

KTAES REGISTERED AGENT CORP.

1401 BRICKELL AVENUE

#700

Miami, FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83 City

84 State

85 Zip

FL

86

Zip

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, hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of President, Secretary, Treasurer, or other officer or director

Signature of Registered Agent or other person authorized to accept service of process

12. OFFICERS AND DIRECTORS

1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

4. NAME

5. STREET ADDRESS

6. CITY, ST, ZIP

7. NAME

8. STREET ADDRESS

9. CITY, ST, ZIP

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. NAME

14. STREET ADDRESS

15. CITY, ST, ZIP

16. NAME

17. STREET ADDRESS

18. CITY, ST, ZIP

19. NAME

20. STREET ADDRESS

21. CITY, ST, ZIP

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

4. NAME

5. STREET ADDRESS

6. CITY, ST, ZIP

7. NAME

8. STREET ADDRESS

9. CITY, ST, ZIP

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. NAME

14. STREET ADDRESS

15. CITY, ST, ZIP

16. NAME

17. STREET ADDRESS

18. CITY, ST, ZIP

19. NAME

20. STREET ADDRESS

21. CITY, ST, ZIP

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

Change ☒ Addition ☐

446 Spadina Road, #207

Toronto, Ontario M5P 3M2

Change ☐ Addition ☐

700001480977

05/09/95-01101-003-000

****200.00 ****200.00

Change ☐ Addition ☐

Change ☐ Addition ☐

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Change ☐ Addition ☐

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(2)(b), Florida Statutes, and I do hereby certify that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if it were made under oath. That I am an officer or director of the corporation or the registered agent or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in a supplemental report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EARL GORMAN, PRESIDENT

4/6/96

4/6/96