

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 16 AM 10:44

DOCUMENT # P94000024632 (9)

1. Corporation Name

CITY METERING, INC.

Principal Place of Business

Mailing Address

201 ALHAMBRA CIR
SUITE 1200
CORAL GABLES FL 33134

201 ALHAMBRA CIR
SUITE 1200
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/30/1994
3a. Date of Last Report

4. FEI Number 65-0498985
Applied For Not Applicable

5. Voluntary or Status Unchanged ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt.

26 Suite, Apt.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LUCKSTEIN, FRED K
201 ALHAMBRA CIR
SUITE 1200
CORAL GABLES FL 33134

81 Name

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

83

84 City

FL

85 Zip Code

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 the if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME ✓ Howard Millhauser
STREET ADDRESS President
CITY, ST, ZIP 1570 Madruga Ave., Ste. 200
Coral Gables, FL 33146

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME ✓ Howard Millhauser
STREET ADDRESS Director
CITY, ST, ZIP 1570 Madruga Ave., Ste. 200
Coral Gables, FL 33146

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

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