

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

1995 MAR 30 PM 5 37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000024803

1. Corporation Name:
Michael's Enterprises of South Florida, Inc.

Principal Place of Business Mailing Address
4318 West Broward Blvd. 4318 W. Broward Blvd.
Suite #3 Suite #3
Plantation, Fl. 33317 Plantation, Fl. 33317

500001445735

-04/03/95--01029--003

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3/31/94	3a. Date of Last Report
4. FEI Number 65-0483131	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	

2. Principal Place of Business 21 4318 W. Broward Blvd. Suite, Apt. #, etc. 22 #3 City & State 23 Plantation, Florida Zip 24 33317	2a. Mailing Address 26 4318 W. Broward Blvd. Suite, Apt. #, etc. 27 #3 City & State 28 Plantation, Florida Zip 29 33317
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9. Name and Address of Current Registered Agent

Bruce, Herman, Esquire
Kelley, Herman, & Mills
1401 E. Broward Blvd., Suite 206
Ft. Lauderdale, Florida 33301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

FL

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 of the person named as registered agent and filer of application)

(NOTE: Registered Agent signature required when filing application)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	PV
NAME	Michael Fett
STREET ADDRESS	6061 S.W. 16 Street
CITY, ST, ZIP	Plantation, Florida 33317
TITLE	ST
NAME	Carrie Fett
STREET ADDRESS	6061 S.W. 16 Street
CITY, ST, ZIP	Plantation, Florida 33317
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
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 hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 190.017, 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: *Michael Fett* Michael Fett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/95

305-797-9322