

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUN 30 AM 9:38

DOCUMENT # P94000027400 (8)

1. Corporation Name

EXPOSITO & HANNAN, P.A.

Principal Place of Business

**2955 S.W. 8 STREET
SUITE 202
MIAMI FL 33135**

Mailing Address

**2955 S.W. 8 STREET
SUITE 202
MIAMI FL 33135**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/11/1994	3a. Date of Last Report
4. FEI Number 65-0484220	Appoint Fee 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 administrative fees under S. 194.012 Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 2955 S.W. 8 ST.	26 2955 SW 8 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 SUITE 204	27 SUITE 204
City & State	City & State
23 MIAMI, FL 33135	28 M. AMI, FL 33135
Zip	Zip
24 33135	29 33135
Country	Country
25 USA	30 USA

9. Name and Address of Current Registered Agent

**HANNAN, MARTIN L
2955 S.W. 8 STREET
SUITE 202
MIAMI FL 33135**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
FL B5 Zip Code

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 person appointed registered agent and the corporation

Signature of person appointed registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	EXPOSITO, JEFFREY	2. NAME	
STREET ADDRESS	2955 S.W. 8 STREET, SUITE 202	3. STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33135	4. CITY, ST, ZIP	
TITLE	D	5. TITLE	☐ Change ☐ Addition
NAME	HANNAN, MARTIN L	6. NAME	
STREET ADDRESS	2955 S.W. 8 STREET, SUITE 202	7. STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33135	8. CITY, ST, ZIP	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY, ST, ZIP		24. CITY, ST, ZIP	

14. I, the undersigned, certify that the information required with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information submitted 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 13. If I am not, I am an attachment with an address.

SIGNATURE:

Jeffrey Exposito
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-26-95 (305) 683-2300
DATE TELEPHONE