

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE

Florida Secretary of State

Secretary of State

1000 North West 1st Street, Tallahassee, FL 32304

APPROVED
AND
FILED

95 MAY 11 PM 3:35

DOCUMENT # P94000040431 (6)

1. Corporation Name

ALEXANDER SCHWARZ, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Location

21654 SAN SIMEON CIRCLE
BOCA RATON FL 33433

Mail Address

21654 SAN SIMEON CIRCLE
BOCA RATON FL 33433

Do Not Write in This Space

3. Date of Corporate Filings

05/31/1994

3a. Date of Last Report

n/a

2. Principal Office Location

21

State, Apt. # etc.

22

City & State

23

Zip

Florida

24

25

2a. Mailing Address

26

State, Apt. # etc.

27

City & State

28

Zip

29

30

4. FIC Number

65- 0494108

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 discharge tax under 34, 1994 (33),
Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81

Name

Alexander A Schwarz

82

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

21654 San Simeon Circle

83

City

Boca Raton

84

State

FL

85

Zip Code

33433

11. Pursuant to the provisions of Sections 190.01 and 190.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 obligation of the registered agent's duties.

SIGNATURE

Alexander Schwarz

Alexander Schwarz

04/26/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12:

NAME	P
NAME	SCHWARTZ, ALEXANDER A
STREET ADDRESS	21654 SAN SIMEON CIRCLE
CITY & STATE	BOCA RATON FL 33433
NAME	T/S
NAME	Helga Schwarz
STREET ADDRESS	21654 San Simeon Circle
CITY & STATE	Boca Raton FL 33433
NAME	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
NAME	
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in New York 1994 (2309), Florida Statutes. I further certify that the information reflected on this annual report or biennial 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 record of holders are provided to carry out the report as required by Chapter 190, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or is an officer or director of the corporation.

SIGNATURE: *Helga Schwarz* Helga Schwarz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/95

(407) 361-0117