

FILE NOW: FILING FEE AFTER MAY 1 IS \$725.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000041161 (8)

1. Corporation Name

ULTIMATE CONCEPTS, INC.

APPROVED
AND
FILED

95 MAY -1 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2761 OCEAN CLUB BLVD., # 186
HOLLYWOOD FL 33019

Mailing Address

2761 OCEAN CLUB BLVD., # 186
HOLLYWOOD FL 33019

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/01/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 2761 Ocean Club Blvd

26 P.O. 220246

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 106

27

City & State

City & State

23 Hollywood FL

28 Hollywood FL

Zip

Country

Zip

Country

24 33019

25 USA

29 33022-0246

30 USA

4. FEI Number

65-0508577

Applied For

Not Applicable

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. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PERLOW, JEFFREY M
1820 E. HALLANDALE BEACH BLVD.
HALLANDALE FL 33009

81 Name

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

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	CROSS, ANDREA S
STREET ADDRESS	P.O. BOX 22-0246 N/A
CITY - ST - ZIP	HOLLYWOOD FL 33022
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 118.07(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:

Andrea S. Cross
ANDREA S. CROSS
PRESIDENT

5/29/95 305-929-8505

Date

Signature (Printed)