

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **P94000044546 (7)**

1. Corporation Name

CENTURY MARKETING INTERNATIONAL INCORPORATED

06/15/94 PM 0:39

CENTURY MARKETING
VALUATION, FLORIDA

Principal Place of Business

**5741-B COACH HOUSE CIRCLE
BOCA RATON FL 33486-8612**

Mailing Address

**5741-B COACH HOUSE CIRCLE
BOCA RATON FL 33486-8612**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

06/15/1994

3a. Date of Last Report

4. FBI Number

65-0516366

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 § 193.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip

24. Country

29. Country

9. Name and Address of Current Registered Agent

**TOMCZAK, JOSEPH S
5741 B COACH HOUSE CIRCLE
BOCA RATON FL 33486-8612**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 requirements of Sections 607.0505, Florida Statutes.

SIGNATURE

(Signature of Agent, if the corporation is changing its registered agent, or both, in the State of Florida)

(Signature of Registered Agent, if the corporation is changing its registered office, or both, in the State of Florida)

(Date)

12. OFFICERS AND DIRECTORS

12.1 NAME
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY, ST. ZIP

12.5 NAME
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY, ST. ZIP

12.9 NAME
12.10 NAME
12.11 STREET ADDRESS
12.12 CITY, ST. ZIP

12.13 NAME
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY, ST. ZIP

12.17 NAME
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY, ST. ZIP

12.21 NAME
12.22 NAME
12.23 STREET ADDRESS
12.24 CITY, ST. ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST. ZIP

13.5 NAME
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST. ZIP

13.9 NAME
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY, ST. ZIP

13.13 NAME
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY, ST. ZIP

13.17 NAME
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY, ST. ZIP

13.21 NAME
13.22 NAME
13.23 STREET ADDRESS
13.24 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 194.01(2)(b), Florida Statutes. I further certify that the information indicated on this filing is not a supplemental annual report as required by Section 194.01(2)(b), Florida Statutes, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the executor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE: **JOSEPH S. TOMCZAK II** 21-APR-95 (407) 393 1727

(Signature and Title of Officer or Director, or Agent, if the corporation is changing its registered agent, or both, in the State of Florida)

(Date)

(Telephone Number)

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

APPROVED
FILED

95 MAY 22 10 30 AM '95

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000044722 (4)**

1. Corporation Name

1234 GROUP, INC.

Principal Place of Business

**1111 LINCOLN RD.
SUITE 500
MIAMI BEACH FL 33139**

Mailing Address

**1111 LINCOLN RD.
SUITE 500
MIAMI BEACH FL 33139**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/14/1994

9a. Date of Last Report

4. FET Number

05-0498972

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 admissible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 523 MICHIGAN AVE

State, Apt. #, etc.

22 FL

City & State

23 MIAMI BEACH FL

Zip

24 33139

26. Mailing Address

26 523 MICHIGAN AVE

State, Apt. #, etc.

27 FL

City & State

28 MIAMI BEACH FL

Zip

29 33139

Country

30 USA

9. Name and Address of Current Registered Agent

**DANIELS, NICHOLAS M
1111 LINCOLN RD.
SUITE 500
MIAMI BEACH FL 33139**

10. Name and Address of Now Registered Agent

81 Name

81 JONATHAN FRYD

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

82 523 MICHIGAN AVE

83

84 City **MIAMI BEACH**

FL

85 Zip Code **33139**

11. Pursuant to the provisions of Sections 607.04(2) and 607.14(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address specified below 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 a resident of the State of Florida and am qualified to accept service of process in the State of Florida.

SIGNATURE

[Signature]

JONATHAN FRYD PRES

4/24/95

12. OFFICERS AND DIRECTORS

86 Name

87 Title

88 Street Address

89 City & State

90 Zip

91 Name

92 Title

93 Street Address

94 City & State

95 Zip

96 Name

97 Title

98 Street Address

99 City & State

100 Zip

101 Name

102 Title

103 Street Address

104 City & State

105 Zip

106 Name

107 Title

108 Street Address

109 City & State

110 Zip

111 Name

112 Title

113 Street Address

114 City & State

115 Zip

13.

ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

116 Name

117 Title

118 Street Address

119 City & State

120 Zip

121 Name

122 Title

123 Street Address

124 City & State

125 Zip

126 Name

127 Title

128 Street Address

129 City & State

130 Zip

131 Name

132 Title

133 Street Address

134 City & State

135 Zip

136 Name

137 Title

138 Street Address

139 City & State

140 Zip

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

JONATHAN FRYD PRES

4/24/95

**405 673
4248**

