

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Secretary of State
Tallahassee, Florida 32399-0001

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 2:58

DOCUMENT # P94000051661 (4)

1. Corporation Name

SICARD DEVELOPMENT, INC.

Principal Place of Business

100 SE 2ND STREET SUITE 2350
MIAMI FL 33131

Principal Place of Business

100 SE 2ND STREET SUITE 2350
MIAMI FL 33131

FILE THIS REPORT WITH THE SECRETARY

3. Date of Incorporation or Organization

07/08/1994

3a. Date of Last Report

Adjusted Fee

Filed Application

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

This corporation has liability for intangible tax under S. 190.034,
Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21. 11767 South Dixie Highway
State, Apt. #, etc.

2a. Mailing Address

26. 11767 South Dixie Highway
State, Apt. #, etc.

City & State

23. Miami, FL

Zip

24. 33156

Country

City & State

28. Miami, FL

Zip

29. 33156

Country

4. 1994 Number

65-0506452

5. Certificate of Status Desired

☐

6. Election Campaign Financing
Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under S. 190.034,
Florida Statutes.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ZAIAC, MANUEL
100 SE 2ND STREET SUITE 2350
MIAMI FL 33131

10. Name and Address of New Registered Agent

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

"I, Gregory Sicard, President of SICARD DEVELOPMENT, INC., do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that my signature has been attested by the Secretary of State."

"I, Gregory Sicard, President of SICARD DEVELOPMENT, INC., do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that my signature has been attested by the Secretary of State."

1995

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	SICARD, GREGORY
STREET ADDRESS	100 SE 2ND STREET SUITE 2350 16445 Collins Ave.
CITY, ST, ZIP	MIAMI, FL 33131 #2724 MIAMI, FL 33160
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	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
15. TITLE	☐ Change ☐ Addition
16. NAME	
17. STREET ADDRESS	
18. CITY, ST, ZIP	
19. TITLE	☐ Change ☐ Addition
20. NAME	
21. STREET ADDRESS	
22. CITY, ST, ZIP	
23. TITLE	☐ Change ☐ Addition
24. NAME	
25. STREET ADDRESS	
26. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that my signature has been attested by the Secretary of State. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Gregory Sicard*
SIGNATURE AND PRINTED NAME OF REGISTERED AGENT
GREGORY G. SICARD (President)

1-6-95 (305) 256-0256