FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:59

DOCUMENT # **P94000055337 (7)**

1. Corporation Name
EXECUTIVE BROTHERS, INC.

Principal Place of Business	Mailing Address
1431 NW 202ND STREET MIAMI FL 33169	1431 NW 202ND STREET MIAMI FL 33169

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/27/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 3800 N.W. 26 STREET	26 3800 N.W. 26 STREET
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 LAUDERDALE LAKES, FL.	City & State 28 LAUDERDALE LAKES, FL.
Zip 24 33311 Country 25 BROWARD	Zip 29 33311 Country 30 BROWARD

4. FEI Number — ☐ 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 S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HARTSFIELD, RONALD D 1431 NW 202ND STREET MIAMI FL 33169	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	11 TITLE	☑ Change ☐ Addition
NAME	BOYD, WALTER R	12 NAME	ROBERT BUTUREZA
STREET ADDRESS	3800 NW 26TH STREET	13 STREET ADDRESS	14102 N.E. 2nd COURT (DELETE)
CITY-ST-ZIP	LAUDERDALE LAKES FL 33311	14 CITY-ST-ZIP	NO. MIAMI, FL. 33161
TITLE	D	21 TITLE	☑ Change ☐ Addition
NAME	BUTUREZA, ROBERT M	22 NAME	THOMAS MISSICK (DELETE)
STREET ADDRESS	14102 NE 2ND COURT	23 STREET ADDRESS	P.O. BOX 680056
CITY-ST-ZIP	NO. MIAMI FL 33161	24 CITY-ST-ZIP	MIAMI, FL. 33168
TITLE	Vice President	31 TITLE	☐ Change ☑ Addition
NAME	CARPENTER, KEVIN L	32 NAME	SECRETARY DEBRA SCOTT
STREET ADDRESS	13523 SW 179TH STREET	33 STREET ADDRESS	1966 N.W. 4th COURT
CITY-ST-ZIP	MIAMI FL 33177	34 CITY-ST-ZIP	MIAMI, FL. 33136
TITLE	Treasurer	41 TITLE	☐ Change ☐ Addition
NAME	HARTSFIELD, RONALD D	42 NAME	
STREET ADDRESS	1431 NW 202ND STREET	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33169	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	MISSICK, THOMAS R	52 NAME	
STREET ADDRESS	POST OFFICE BOX 680056	53 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33168	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	POLLARD, JOHNNIE C	62 NAME	
STREET ADDRESS	2119 NW 41ST STREET	63 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	64 CITY-ST-ZIP	

CORRECTED BY PREP 1

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 119.07(3)(i), 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: Walter R. Boyd 4-21-95 305-488-3817
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED DIRECTOR — Date — Daytime Phone #

0184445 CP