

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # P94000059409 (0)

95 JUN 26 AM 8:44

1 Corporation Name:

MARDREW CORPORATION ✓

Principal Place of Business:

**11477 SW 84TH LN
MIAMI FL 33173**

Mailing Address:

**11477 SW 84TH LN
MIAMI FL 33173**

DO NOT WRITE IN THIS SPACE

3 Date Incorporated or Qualified 3a Date of Last Report
08/11/1994

4 FIC Number Applied for
65-0514547 Not Applicable

5 Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6 ☐ **\$5.00 May Be Added to Fees**

8 This corporation has not been organized under the laws of the State of Florida Statutes ☒ Yes ☐ No

2 Principal Place of Business:

21 **7930 LINCOLN ST**

22 Suite, Apt. #, etc. **PO Box 23-188**

23 City & State **Miami FL**

24 ZIP **33172**

25 Country **USA**

26 Name and Address of Current Registered Agent

27 Name and Address of New Registered Agent

28 Name

29 FIC Number (Last Acquisition)

30 City

31 State

32 ZIP Code

33 Signature

34 Title

35 Date

36 Signature

37 Title

38 Date

39 Signature

40 Title

41 Date

42 Signature

43 Title

44 Date

45 Signature

46 Title

47 Date

48 Signature

49 Title

50 Date

51 Signature

52 Title

53 Date

54 Signature

55 Title

56 Date

57 Signature

58 Title

59 Date

60 Signature

61 Title

62 Date

63 Signature

64 Title

65 Date

66 Signature

67 Title

68 Date

69 Signature

70 Title

71 Date

72 Signature

73 Title

74 Date

75 Signature

76 Title

77 Date

78 Signature

79 Title

80 Date

81 Signature

82 Title

83 Date

84 Signature

85 Title

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-20 95

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayhew
Secretary of State
CHRISTINE M. CLARK, PH.D. 1995

DOCUMENT # P94000059576 (6)

N

BRITTANY MARIE, INC.

1. Principal Place of Business	2a. Mailing Address
9455 COLLINS AVE #1005 MIAMI BEACH FL 33154	9455 COLLINS AVE #1005 MIAMI BEACH FL 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified		3a. Date of Last Report	
08/12/1994		/	
2. Principal Place of Business	2a. Mailing Address	4. FET Number	Applied For
21	25	650510739	Not Applicable
State, Apt. #, etc.	State, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	☐	
City & State	City & State	6	\$5.00 May Be Added to Fees
23	28	☐	
7. FET	8. FET	8. This Corporation has liability for filing late under Section 607.05, Florida Statutes	☐ Yes ☒ No
24	25	29	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GARCIA, WILLIAM 710 S DIXIE HWY CORAL GABLES FL 33146		81. Name	
		82. 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 of Registered Agent or of Registered Agent's Representative) _____ (Signature of Registered Agent or of Registered Agent's Representative)

12. OFFICERS AND DIRECTORS		13.	
1. NAME	D CAMARAZA, MARIA 9455 COLLINS AVE APT 1005 MIAMI BEACH FL 33154	1. NAME	P, D ☒ Change ☐ Addition
2. NAME	D CAMARAZA, JESUS 9455 COLLINS AVE #1005 MIAMI BEACH FL 33154	2. NAME	S, D ☒ Change ☐ Addition
3. NAME	D GUTIERREZ, ROSA 10515 SW 148TH AVE MIAMI FL 33182	3. NAME	T, D ☒ Change ☐ Addition
4. NAME		4. NAME	MIAMI, FL 33186 ☐ Change ☐ Addition
5. NAME		5. NAME	☐ Change ☐ Addition
6. NAME		6. NAME	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. NAME		8. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and claims not equally for the exemption stated in Section 607.0502, Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report, as filed and accurate and that the signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *MARIA D. CAMARAZA* 6.12.95 864-9581
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

PROFIT
CORPORATION
ANNUAL REPORT
1995

1. THE PRESIDENT OF THE UNITED STATES
2. THE VICE PRESIDENT OF THE UNITED STATES
3. THE SECRETARY OF THE UNITED STATES
4. THE ATTORNEY GENERAL OF THE UNITED STATES
5. THE CHIEF JUSTICE OF THE SUPREME COURT OF THE UNITED STATES

DOCUMENT # **P94000059744 (0)**

AMERICAN SKIN CARE PRODUCTS, INC.

P.O. BOX 1354 CLEARWATER FL 34617-1354		P.O. BOX 1354 CLEARWATER FL 34617-1354		Do not write in this space	
1. Principal Place of Business		2a. Mailing Address		3. Date incorporated or qualified 08/15/1994	
21. State of Inc. FL		26. State of Inc. FL		4. FID Number 59-3261926	
22. City Clearwater		27. City Clearwater		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. FID Number		28. FID Number		6. This entity is subject to annual report filing ☐ \$5.00 May Be Added to Fees	
24. FID Number		29. FID Number		8. This corporation has already been subject to annual report filing ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
GASSMAN, ALAN S 1212 COURT ST. SUITE B CLEARWATER FL 34616				81. Name	
				82. Current Address (If FID Number is Not Applicable)	
				83.	
				84. City	
				FL	
11. I, the undersigned, do hereby certify that the above named corporation satisfies the statement for the purpose of changing its registered office as required by Chapter 136, Florida Statutes, and that the corporation has authorized the undersigned to execute this statement as required by Chapter 136, Florida Statutes.					
SIGNATURE					
12. OFFICERS AND DIRECTORS					
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		13. ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
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NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
NAME D HARTZ, JOHN M 514 WINDWARD PASSAGE CLEARWATER FL 34630		ADDRESS (If FID Number is Not Applicable)			
14. I, the undersigned, do hereby certify that the information provided on this filing is voluntarily furnished and is true and correct, and that the undersigned is authorized to execute this statement as required by Chapter 136, Florida Statutes, and that the undersigned is authorized to execute this statement as required by Chapter 136, Florida Statutes, and that the undersigned is authorized to execute this statement as required by Chapter 136, Florida Statutes.					
SIGNATURE: [Signature]					
SIGNATURE AND TYPED OR PRINTED NAME OF AGING OFFICER OR DIRECTOR					

0825034 131251

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # P94000060255 (4)

1. Corporation Name

GRANDVIEW, INC.

Principal Place of Business

1717 N BAYSHORE DR
MIAMI FL 33132

Mailing Address

1717 N BAYSHORE DR
MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

08/16/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FIC Number

65-0512463

Applied For

Not Applicable

State Apt. # etc

22

State Apt. # etc

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. Does corporation have liability for delinquent fees under § 215.07, Florida Statutes?

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARINI, RONALD A
200 S BISCAYNE BLVD
FIRST UNION FINANCIAL CENTER SUITE 4020
MIAMI FL 33131

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 607.0504, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, but no change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am aware of and accept the obligations of Section 607.0504, Florida Statutes.

SIGNATURE

Signature of Registered Agent or New Registered Agent (if applicable)

Signature of Registered Agent or New Registered Agent (if applicable)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

NAME

D
GNASSI, GERALDO
1717 N BAYSHORE DR
MIAMI FL 33132

NAME

P.
JULIE GRIMES
1717 N. BAYSHORE DR
MIAMI FL 33132

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

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STREET ADDRESS

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STATE

ZIP CODE

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STREET ADDRESS

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STATE

ZIP CODE

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE:

Julie Grimes

JULIE GRIMES

05/25/95

305-530-0609

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
 Beverly B. Northing
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94000060535 (9)

1 Corporation Name:
AMEFRA CORP.

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

1720 SW 30TH AVENUE
MIAMI FL 33145

9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 8

1720 SW 30TH AVENUE
MIAMI FL 33145

$$|E| = |J(C)| = |x_0(y_0)| = 114^2 = 12996.$$

| | |
|---|-------------------------|
| 3. Date by which the case is to be closed | 3a. Date of last report |
| 08/17/1994 | |

| | |
|------------|------------------|
| 4. Filing | Applied for |
| 65-0345619 | Next Application |

| | | | |
|---|--------------------------------|---|---|
| 5 | Certificate of Status Deceased |  | \$8.75 Additional
Fee Required |
|---|--------------------------------|---|---|

6 **\$5.00** May Be
Added to Fees

[illegible]

2011年12月11日

21

10. 10.00

100

58

2a. Military Agencies

26 _____
Suisse, Aut # 11

July 26, 1964

1000

70 70

9. Name and Address of Current Registered Agent

GONZALEZ, FRANCISCO D
1720 SW 30TH AVENUE
MIAMI FL 33145

10 Name and Address of New Registered Agent

| | |
|-----------|-------------|
| B1 | News |
|-----------|-------------|

82 (b) (5) DPP: Notwithstanding to Not A: explainable

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11. Pursuant to the provisions of Sections 601(a)(1)(A) and 601(b)(1)(A) Florida Statutes, the undersigned, a duly qualified and duly sworn officer of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the document or documents upon which the foregoing is based.

5318 1942 11 11 11 11

[illegible]
$$\frac{d}{dt} \left(\frac{\partial L}{\partial \dot{x}} \right) = \frac{\partial L}{\partial x}$$

• • •

| 12. | CHEN, APOLINA (T) |
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| NAME | PD |
| DATE OF BIRTH | GONZALEZ, FRANCISCO D |
| SEX | 1720 SW 30TH AVENUE |
| HEIGHT | MIAMI FL 33145 |
| WEIGHT | STD |
| HAIR | GONZALEZ, MARIA A |
| COMPLEXION | 1720 SW 30TH AVENUE |
| RELIGION | MIAMI FL 33145 |
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| x_1, y_1 | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_2, y_2 | | | |
| $x_3, y_3 = A_1(0,0)$ | | | |
| $x_4, y_4 = A_2(0,0)$ | | | |
| x_5, y_5 | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_6, y_6 | | | |
| $x_7, y_7 = A_3(0,0)$ | | | |
| $x_8, y_8 = A_4(0,0)$ | | | |
| $x_9, y_9 = A_5(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{10}, y_{10} | | | |
| $x_{11}, y_{11} = A_6(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{12}, y_{12} | | | |
| x_{13}, y_{13} | | | |
| $x_{14}, y_{14} = A_7(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{15}, y_{15} | | | |
| $x_{16}, y_{16} = A_8(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{17}, y_{17} | | | |
| $x_{18}, y_{18} = A_9(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{19}, y_{19} | | | |
| $x_{20}, y_{20} = A_{10}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{21}, y_{21} | | | |
| $x_{22}, y_{22} = A_{11}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{23}, y_{23} | | | |
| $x_{24}, y_{24} = A_{12}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{25}, y_{25} | | | |
| $x_{26}, y_{26} = A_{13}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{27}, y_{27} | | | |
| $x_{28}, y_{28} = A_{14}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{29}, y_{29} | | | |
| $x_{30}, y_{30} = A_{15}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{31}, y_{31} | | | |
| $x_{32}, y_{32} = A_{16}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{33}, y_{33} | | | |
| $x_{34}, y_{34} = A_{17}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
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| $x_{36}, y_{36} = A_{18}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{37}, y_{37} | | | |
| $x_{38}, y_{38} = A_{19}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{39}, y_{39} | | | |
| $x_{40}, y_{40} = A_{20}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{41}, y_{41} | | | |
| $x_{42}, y_{42} = A_{21}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{43}, y_{43} | | | |
| $x_{44}, y_{44} = A_{22}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{45}, y_{45} | | | |
| $x_{46}, y_{46} = A_{23}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{47}, y_{47} | | | |
| $x_{48}, y_{48} = A_{24}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{49}, y_{49} | | | |
| $x_{50}, y_{50} = A_{25}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{51}, y_{51} | | | |
| $x_{52}, y_{52} = A_{26}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{53}, y_{53} | | | |
| $x_{54}, y_{54} = A_{27}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{55}, y_{55} | | | |
| $x_{56}, y_{56} = A_{28}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{57}, y_{57} | | | |
| $x_{58}, y_{58} = A_{29}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{59}, y_{59} | | | |
| $x_{60}, y_{60} = A_{30}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{61}, y_{61} | | | |
| $x_{62}, y_{62} = A_{31}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{63}, y_{63} | | | |
| $x_{64}, y_{64} = A_{32}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
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| $x_{66}, y_{66} = A_{33}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{67}, y_{67} | | | |
| $x_{68}, y_{68} = A_{34}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{69}, y_{69} | | | |
| $x_{70}, y_{70} = A_{35}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{71}, y_{71} | | | |
| $x_{72}, y_{72} = A_{36}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{73}, y_{73} | | | |
| $x_{74}, y_{74} = A_{37}(0,0)$ | | <input type="button" value="Change"/> | <input type="button" value="Addition"/> |
| x_{75}, y_{75} | | | |
| $x_{76}, y_{76} = A_{38}(0,0)$ | | <input type="button" value="Change"/> | |

[illegible]

SIGNATURE:

DATE FILE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCISCO D. GONZALEZ

6/19/95 (305) 325-0221

0040134 CB

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Tallahassee, FL 32399-0400

DOCUMENT # P94000061430 (2)

1. Corporation Name
TUPAN, INC.

2. Principal Office Address
3444 MAIN HIGHWAY
NO 16-B
MIAMI FL 33133

3. Mailing Address
%BRUCE JAY TOLAND, ESQUIRE
800 BRICKELL AVE, SUITE 1100
MIAMI FL 33131

Do Not Write in This Space

| | |
|---|--|
| 3. Filing Jurisdiction (Number) | 3a. Date of Last Report |
| 08/16/1994 | |
| 4. FIC Number | ☒ Applied For
☐ Not Applicable |
| 5. Certificate of Status Desired | ☐ \$8.75 Additional
Fee Required |
| 6. Filing Campaign Finance and
Trust Fund Contribution | ☐ \$5.00 May Be
Added to Fees |
| 7. This corporation has capacity for intrastate tax under Florida
Statutes | ☐ Yes ☒ No |

| | |
|---------------------------------|---------------------|
| 2. Filing Jurisdiction (Number) | 2a. Mailing Address |
| 21 | 26 |
| 3. Filing Jurisdiction (Number) | 3a. Mailing Address |
| 22 | 27 |
| 4. Filing Jurisdiction (Number) | 4a. Mailing Address |
| 23 | 28 |
| 5. Filing Jurisdiction (Number) | 5a. Mailing Address |
| 24 | 29 |

9. Name and Address of Current Registered Agent

TOLAND, BRUCE J
800 BRICKELL AVE
SUITE 1100
MIAMI FL 33131

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 907.001 and 907.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, and hereby accepted the appointment of registered agent. I am hereby authorized to accept the designation of the new registered agent.

Signature

Signature of Current Registered Agent

Signature of New Registered Agent

At:

| 12. OFFICERS AND DIRECTORS | 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS | | | | | | | | | | | | | | | | |
|---|--|---|----------------|--------------------------|------|------------------------------|-------|----------------|--|------|------|----------------|--|------|--|-------|--|
| <table border="1"> <tr> <td>NAME</td> <td>D</td> </tr> <tr> <td>STREET ADDRESS</td> <td>MATARANGAS, CHRISTIANE V</td> </tr> <tr> <td>CITY</td> <td>800 BRICKELL AVE, SUITE 1100</td> </tr> <tr> <td>STATE</td> <td>MIAMI FL 33131</td> </tr> </table> | NAME | D | STREET ADDRESS | MATARANGAS, CHRISTIANE V | CITY | 800 BRICKELL AVE, SUITE 1100 | STATE | MIAMI FL 33131 | <table border="1"> <tr> <td>NAME</td> <td>P, S</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY</td> <td></td> </tr> <tr> <td>STATE</td> <td></td> </tr> </table> | NAME | P, S | STREET ADDRESS | | CITY | | STATE | |
| NAME | D | | | | | | | | | | | | | | | | |
| STREET ADDRESS | MATARANGAS, CHRISTIANE V | | | | | | | | | | | | | | | | |
| CITY | 800 BRICKELL AVE, SUITE 1100 | | | | | | | | | | | | | | | | |
| STATE | MIAMI FL 33131 | | | | | | | | | | | | | | | | |
| NAME | P, S | | | | | | | | | | | | | | | | |
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| CITY | | | | | | | | | | | | | | | | | |
| STATE | | | | | | | | | | | | | | | | | |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 907.1508, Florida Statutes. I further certify that the information included on this change report is supplemental information and is not a change of the corporation's name and is not a change of the corporation's principal office or change of the corporation in the manner of business empowered to execute this report as required by Chapter 907, Florida Statutes, and that my name appears on the list of officers and directors of the corporation with an address.

SIGNATURE:

C.V. Matarangas
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CHRISTIANE V. MATARANGAS

5/3/95

443-9250

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT**

1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Murphree
Secretary of State
Division of Corporations

FILED
STATE NO.

DOCUMENT # P94000061579 (6)

For Information Only

3'S COMPANY, INC.

DO NOT WRITE IN THIS SPACE

3 Date Incorporated or Qualified **08/22/1994** 3a Date of Last Report

4 F.E.I. Number **65-0516873** Applied For ☐ Not Applicable ☐

5 Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6 ☐ **\$5.00 May Be Added to Fees**

8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

10 Name and Address of New Registered Agent

Principal Place of Business
**601-S OCEAN DR-
HOLLYWOOD FL 33019**

Mailing Address
**601-S OCEAN DR
HOLLYWOOD FL 33019**

21 Principal Place of Business
**242 EAST DANA BEACH BLVD
Suite Apt # 101**

26 Mailing Address
**242 EAST DANA BEACH BLVD
Suite Apt # 101**

22 City & State
DANA FLORIDA

27 City & State
DANA FLORIDA

24 Zip Code
33004

29 Zip Code
33004

9. Name and Address of Current Registered Agent
**MILLER, RONALD L
601-S OCEAN DR-
HOLLYWOOD FL 33019**

81 Name **MILLER, RONALD L**
82 Street Address (P.O. Box Number is Not Acceptable) **3440 HOLLYWOOD BLVD**
83 **Suite 320**
84 City **HOLLYWOOD FLORIDA FL** 85 Zip Code **33021**

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 607.0502, Florida Statutes.

SIGNATURE

(Signature of person authorized to accept appointment as registered agent)

(Signature of person authorized to accept appointment as registered agent)

| 12. OFFICERS AND DIRECTORS | |
|----------------------------|---|
| NAME | D
DE FRANCISCI, PAOLO
414 SE 11TH TER
DANIA FL 33024 |
| NAME | D
FISCHER, MARIE J
8850 SW 24TH PL-
MIRAMAR FL 33025 |
| NAME | |
| NAME | |
| NAME | |
| NAME | |
| NAME | |

| | |
|------|--|
| NAME | ☐ Change ☐ Addition |
| NAME | ☒ Change ☐ Addition |
| NAME | ☐ Change ☐ Addition |
| NAME | ☐ Change ☐ Addition |
| NAME | ☐ Change ☐ Addition |
| NAME | ☐ Change ☐ Addition |
| NAME | ☐ Change ☐ Addition |

14. The undersigned certifies that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information included 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 1907, Florida Statutes, and that my name appears on Block 12 or Block 13, change of officer or director attachment with an address.

SIGNATURE: **Paul Miller**
SIGNATURE AND PRINTED OR WRITTEN NAME OF SIGNING OFFICIAL OR DIRECTOR
PAOLO DE FRANCISCI

PRES.

6-19-95 **1309**
922-0020
921-4970

CR03034 (3/95)

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

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State

1995

6-23-95

B =

7497

FILED IN

DOCUMENT # P94000061604 (2)

1. Corporation Name

DORAL PAINT & BODY SHOP INC.

Principal Place of Business

1002 E. 29 STREET
HIALEAH FL 33013

Altering Address

1002 E. 29 STREET
HIALEAH FL 33013

(If Not Applicable, Use This Space)

3. Date of Incorporation/Qualification

3a. Date of Last Report

08/22/1994

2. Principal Place of Headquarters

2b. Altering Address

4. FFI Number

Applied For

65-0471837

Not Applicable

21. State App # 100

26. State App # 100

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22. City & State

27. City & State

6. Election Campaign Financing

\$5.00 May Be Added to Fees

23. City & State

28. City & State

Trust Fund Contribution

24. City & State

29. City & State

7. This corporation is not subject to inspection by Chapter 193, Florida Statutes

25. City & State

30. City & State

8. Florida Statutes

26. City & State

31. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SILVA, ARCADIO
1002 E. 29 STREET
HIALEAH FL 33013

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 607.0901 and 607.1508, Florida Statutes, this 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 607.0905, Florida Statutes.

SIGNATURE

(If Not Applicable, Signatures of Registered Agent and Director)

(If Not Applicable, Signatures of Registered Agent and Director)

(If Not Applicable, Signatures of Registered Agent and Director)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

| | |
|-----------|---|
| 1. Name | PSD
SILVA, ARCADIO
161 E. 36 STREET
HIALEAH FL 33013 |
| 2. Name | |
| 3. Name | |
| 4. Name | |
| 5. Name | |
| 6. Name | |
| 7. Name | |
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not equally for the purposes stated in law. I am a resident of the State of Florida and I am duly qualified to execute this report as required by Chapter 193, Florida Statutes, and that my signature shall have the same legal effect as if made under oath. That any officer or director of this corporation or the removal or resignation of any officer or director of this corporation as required by Chapter 193, Florida Statutes, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: *ARCADIO SILVA*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

