

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**

95 MAR 23 AM 9:59

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000060770 (2)

1. Corporation Name

ALONSO & BERNSTEIN, INC.

Principal Place of Business

**5975 SUNSET DR PH-802
SOUTH MIAMI FL 33143**

Mailing Address

**5975 SUNSET DR PH-802
SOUTH MIAMI FL 33143**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/17/1994

3a. Date of Last Report

4. FEI Number

85-0519375

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**DEBIANCHI, MICHELE R
C/O ALONSO & BERNSTEIN
5975 SUNSET DR PH-802
SOUTH MIAMI FL 33143**

10. Name and Address of New Registered Agent

81 Name

Michele R. DeBianchi, Esq.

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

5975 Sunset Drive, PH 802

83

84 City

South Miami

85 FL

86 Zip Code

33143

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

Michele R. DeBianchi

Michele R. DeBianchi, Esq.

3/20/95

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

BLACKMAN, JOHN

STREET ADDRESS

5975 SUNSET DR PH-802

CITY-ST-ZIP

SOUTH MIAMI FL 33143

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE

D

NAME

THOMPSON, KIM

STREET ADDRESS

5975 SUNSET DR PH-802

CITY-ST-ZIP

SOUTH MIAMI FL 33143

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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 110.07(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:

John Blackman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN BLACKMAN - PRESIDENT

03/20/95

Date

Signature Printed #