

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUL 12 AM 11:30

TALLAHASSEE, FLORIDA

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-07/13/95--01081--010
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P94000062072 (1)

1. Corporation Name

FORTUNES UNLIMITED INC.

Principal Place of Business

6151 MIRAMAR PARKWAY
SUITE 300
MIRAMAR FL 33023

Mailing Address

6151 MIRAMAR PARKWAY
SUITE 300
MIRAMAR FL 33023

3. Date Incorporated or Qualified
08/18/1994

3a. Date of Last Report
8/18/94

4. FEI Number
65-0507891

Applied For
Not Applicable

2. Principal Place of Business

21 5557 W. OAKLAND PARK BLVD

2a. Mailing Address

26 5557 W. OAKLAND PARK BLVD

Suite, Apt. #, etc.

22 #500

Suite, Apt. #, etc.

27 #500

City & State

23 Landeshill FL

City & State

28 Landeshill FL

Zip

24 33023

Country

25 Broward

Zip

29 33023

Country

30 Broward

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

CATANIA, NICK R
6151 MIRAMAR PARKWAY
SUITE 300
MIRAMAR FL 33023

10. Name and Address of New Registered Agent

01 Name

NICK R. CATANIA

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

03 5557 W. OAKLAND PARK BLVD

04 City Landeshill

FL

05 Zip Code 33023

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 607.0504, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME CATANIA, NICK
STREET ADDRESS 20240 N.E. 3 COURT, SUITE 8
CITY - ST - ZIP NORTH MIAMI FL 33179

TITLE V
NAME HERMAN, SCOTT
STREET ADDRESS 1851 WILDWOOD LANE N.
CITY - ST - ZIP DEERFIELD BEACH FL 33442

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 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:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

NICK CATANIA

6/29/95 305962-2063