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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS 1996 P94000062420 (2) **DOCUMENT #** 1. Corporation Name M. LANDAU OF FLORIDA, INC. Mailing Address Principal Place of Business 8540 NW 6 LANE 8540 NW 6 LANE #110 #110 MIAMI FL 33126 MIAMI FL 33126 3a. Date of Last Report 3. Date Incorporated or Qualified US US 08/24/1994 06/14/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0517552 Not Applicable 26 21 \$8.75 Additional Suite Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability or intangible tax under s. 199.032, Country **y** Zip Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LANDAU, SILVIO M 82 Street Address (P.O. Box Number is Not Acceptable) 8540 NW 6 LANE В3 SUITE 110 Zip Code **MIAMI FL 33126** 85 84 City 11. Pursuant to the provisions of Sections 607,0507 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE: [NOTE Propriessal Agent's posture required when religioning Signature, hypoid or printed matter of registerior age it and the it applies the CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change ☐ Addition DELETE 1 11111 PSD THEF LANDAU. SILVIO M 1.2 NAME NAME 8540 NW 6 LANE #110 1.3 STREET ADDRESS STREET ADDRESS 14 CITY - ST ZIP MIAMI FL CITY - ST - ZIP Addition Change DELFTE 2 1 TIELE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3.1111.€ TITLE 3.2 NAME NAME 3.3 STHEET ADDRESS STREET ADDRESS 3 4 Cilir - \$T - ZIP CITY - ST - ZIP ☐ Change Addition DELF 1E 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY ST-ZIP CITY - \$1-7iP ☐ Addition Change DELETE 5 1 TIFLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - ST - ZIF CHY-ST ZIP

14. I do hereby certify that the information supplied with this filing is vot intarily furnished and closes not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or suppliered and indicated and that my signature shall have the same logal effect as if made under cath; 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 Brock 13 if changes or on an attachment with an address

6 1 T TEF

6.2 NAME 6.3 STREET ADDRESS

6.4 O(15 - ST - Z)F

SIGNATURE:

TI\*LE

STREET ADDRESS

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[ ] DELETE

4/12/96 305-553-4233

☐ Change

Addition