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 JUN 25 AM 8:31

DOCUMENT # P94000062583 (7)

1. Corporate Name

GEMRON ENTERPRISES, INC.

Principal Place of Business

2165 TROUT COURT
NAPLES FL 33962

Mailing Address

2165 TROUT COURT
NAPLES FL 33962

(Do Not Write Above This Line)

3. Date of Last Report: 08/22/1994

3a. Date of This Report:

2. Principal Place of Business — 21

2a. Mailing Address — 26

State Agency — 22

State Agency — 27

City, State — 23

City, State — 28

24 — 25 — 29 — 30

4. FEI Number: 65-051 8834

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. Does corporate tax liability for corporate income tax under Florida Statutes: [X] Yes [ ] No

9. Name and Address of Current Registered Agent

LEHMAN, CHARLES C
700 ELEVENTH STREET SOUTH
SUITE 203
NAPLES FL 33940

10. Name and Address of New Registered Agent

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 Section 607.0501, 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. The corporation is aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR DATA

D
MCCONNELL, RONNIE B
2165 TROUT COURT
NAPLES FL 33962

D
MCCONNELL, GAIL E
2165 TROUT COURT
NAPLES FL 33962

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

Change [ ] Addition [ ]

14. I hereby certify that the information supplied with this report is complete and accurate, and that I am executing this report in accordance with Section 607.0203, Florida Statutes. I further certify that I am familiar with and authorized to execute this report on behalf of the corporation and that the signature appearing below is in accordance with Section 607.0501, Florida Statutes.

SIGNATURE: Ronnie B. McConnell — RONNIE B. MCCONNELL — 5-28-95 — 263-2114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER

0330707 CP

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED

DOCUMENT # P94000062677 (7)

1. Corporate Name

DRAGON LADY INVESTMENTS, INC.

Principal Place of Business

7501 WEST OAKLAND PARK BLVD.
SUITE 201
FORT LAUDERDALE FL 33319

Mailing Address

7501 WEST OAKLAND PARK BLVD.
SUITE 201
FORT LAUDERDALE FL 33319

3. Date Incorporated / Qualified: 08/22/1994

3a. Date of Last Report

2. Principal Place of Business (21)

2a. Mailing Address (26)

Suite, Apt. # or P.O. Box (22)

Suite, Apt. # or P.O. Box (27)

City & State (23)

City & State (28)

24 | 25 | 29 | 30

4. FEI Number — ☑ 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 is requesting, pursuant to Section 607.0505, Florida Statutes, to be placed in non-profit status. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SCHNEIDER, LAZ L
100 NORTHEAST THIRD AVENUE
SUITE 400
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

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 Section 607.1622, Florida Statutes, the undersigned corporation hereby changes its principal place of business to the address listed above. Pursuant to Section 607.0505, Florida Statutes, the undersigned corporation hereby changes its mailing address to the address listed above.

Signature

12. OFFICER AND DIRECTOR

13.

DIRECTOR/PRESIDENT/S/T ☐ Change ☑ Add
MICHELE FROST
7501 WEST OAKLAND PARK BLVD. SUITE 201
FORT LAUDERDALE, FL 33319

14. I hereby certify that the information supplied with this filing complies with the requirements of Section 607.1622, Florida Statutes. I further certify that the corporation named herein has complied with the requirements of Section 607.1622, Florida Statutes, relating to the maintenance of the registered office and registered agent. I am familiar with and accept the duties and responsibilities as registered agent for the corporation.

SIGNATURE: X Michele Frost 6/20/95 (305) 370-7758

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHELE. FROST

CR2E034 (3/95)

0076849 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

DOCUMENT # P94000062904 (5)

1. TAKING STOCK, INC.

Principal Place of Business	Mailing Address
676 WEST PROSPECT ROAD FORT LAUDERDALE FL 33309	676 WEST PROSPECT ROAD FORT LAUDERDALE FL 33309

3. 08/25/1994

4. FEI Number: 65-0515235

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. X Yes

9. Name and Address of Current Registered Agent

NORCIGLIO, RUTH
676 WEST PROSPECT ROAD
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

FL

11. SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	Dir/Pres
NAME	C Borko
STREET ADDRESS	676 W. Prospect Rd
CITY-ST-ZIP	Ft. Lauderdale Fl 33309

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14.

SIGNATURE: [signature] May 1, 1995 (305) 772-8131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0210162 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DOCUMENT # P94000062976 (3)

N

PLACEMENT EXPERTS, INC.

2000 W. GLADES RD. SUITE 300
BOCA RATON FL 33431

2000 W GLADES RD. SUITE 300
BOCA RATON FL 33431

3. 08/23/1994

4. 65-0520319

5. $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

STAMM, BRADFORD H
2000 W. GLADES RD., SUITE 300
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

84 FL

12.

D
STAMM, BRADFORD H
2000 W. GLADES RD., SUITE 300
BOCA RATON FL 33431

13.

SIGNATURE:

6/21/95

407-368-6667

0257230 CP

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 5/1/95: $275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

DOCUMENT # **P94000063411 (0)**

1. **HOOK ME UP, INC.**

Principal Address	Mailing Address
711 COQUINA WAY BOCA RATON FL 33432	711 COQUINA WAY BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/24/1994
3a. Date of Last Report:
4. FEI Number: 65-0527562 — 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

21	26
22	27
23	28
24	25 / 29 / 30

9. Name and Address of Current Registered Agent

NESTICO, MICHAEL T
711 COQUINA WAY
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS	13.	
D NESTICO, MICHAEL T 711 COQUINA WAY BOCA RATON FL 33432		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is absolutely furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the corporation named in this annual report or supplemental annual report is true and correct 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 above, or on an attached report with an address.

SIGNATURE: Michael T. Nestico — 6-14-95 — 407-382-8769

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

0066371 CP

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)

1995

DOCUMENT # P94000063425 (0)

EUROPEAN STONECRAFTERS, INC.

1900 J & C BOULEVARD
NAPLES FL 33942

1900 J & C BOULEVARD
NAPLES FL 33942

3. 08/29/1994 — 3a. 8/95

4. 65-05157982

5. $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

8.

21 — 2a. 26 2338 IMMOKALEE RD.

22 — 27 # BOX 263

23 — 28 NAPLES FLORIDA

24 33942 — 25 COLLIER — 29 33942 — 30 COLLIER

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: DONATO V. PENSENTI

82 4110 3RD AVE S.W.

83

84 NAPLES — FL — 85 33999

11. Donato V. Pensenti (PRESIDENT) DONATO V. PENSENTI 6/15/95

12.
P
PENSENT, DONATO V
1900 J & C BOULEVARD
NAPLES FL 33942

13. PRESIDENT/[redacted] X
DONATO V.PENSENTI
2338 IMMOKALEE RD. BOX 263
NAPLES FLORIDA 33942

14.

SIGNATURE: Donato V. Pensenti, DONATO V. PENSENTI 6/15/95 (941)947-6734

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

0162256 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DOCUMENT # **P94000063534 (9)**

SUPRA BLINDS, INC.

% ARIEL HELVER
6368 S.W 139 COURT
MIAMI FL 33183

% ARIEL HELVER
6368 S.W. 139 COURT
MIAMI FL 33183

3. 08/25/1994
3a. N/A
4. 65-0521255
5. $8.75 Additional Fee Required
6. $5.00 May Be Added to Fees
8. [X] Yes [ ] No

9. Name and Address of Current Registered Agent

TURK, HAROLD J
1428 BRICKELL AVENUE
MAIN FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 FL 85

11.

12.

D
HELVER, ARIEL
6368 S.W. 139 COURT
MIAMI FL 33183

D
HIDALGO, JORGE
15441 S.W. 159 STREET
MIAMI FL

13.

14.

SIGNATURE: President 5/1/95 593-1510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0200260 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

N

DOCUMENT # P94000064443 (2)

1. CENTURION INDUSTRIAL SUPPLY, INC.

999 PONCE DE LEON BLVD 30
CORAL GABLES FL 33134

999 PONCE DE LEON BLVD. 30
CORAL GABLES FL 33134

3. 08/29/1994

3a. N/A

4. FEI Number
65-0514676

Applied For
Not Applicable

5. Certified Copies Desired — $8.75 Additional Fee Required

6. Effective Upon Filing (Optional) / Time — $5.00 May Be Added to Fees

7. The undersigned agrees to comply with the provisions of Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent

CENTURION, MARTA M
999 PONCE DE LEON BLVD, 30
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is N.A. for Florida)

83

84 City — FL — 85 Zip Code

11. The undersigned agrees to comply with the provisions of Florida Statutes pertaining to persons registered to accept service of process for the above stated corporation, at the place designated in this certificate, and agrees to comply with the provisions of all statutes relative to the proper and complete performance of his/her duties, and is familiar with and accepts the obligations of his/her position as registered agent.

12.
D
CENTURION, MARTA M
932 OBISPO AVE
CORAL GABLES FL 33134

13. Additional officer/director information

14. The undersigned submits the attached amendment, and is familiar with and accepts the duties and obligations of section 607.325, Florida Statutes.

SIGNATURE: Marta M. Centurion MARTA M. CENTURION 6/18/95 (305)443-0962
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0137691 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DOCUMENT # P94000064509 (0)

N

PNC INTERNATIONAL, INC.

9100 S DADELAND BLVD #704
MIAMI FL 33156

9100 S DADELAND BLVD #704
MIAMI FL 33156

3. 09/01/1994

4. 65-0159389

5. $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

~~HERNANDEZ, VIRGINIA~~
~~9100 S DADELAND BLVD #704~~
~~MIAMI FL 33156~~

10. Name and Address of New Registered Agent

81 Name: DE FERIA, DELFIN
82 Street Address: 9100 S. DADELAND BLVD
83 Suite 704
84 City: MIAMI FL 85 Zip Code: 33156

11. DV 04/20/95

12. OFFICERS AND DIRECTORS

DP
~~HERNANDEZ, VIRGINIA~~
~~9100 S DADELAND BLVD #704~~
~~MIAMI FL 33156~~
DV
~~ORTEGA, PATRICIA~~
~~9100 S DADELAND BLVD #704~~
~~MIAMI FL 33156~~
DST
~~LEE, RICHARD~~
~~9100 S DADELAND BLVD #704~~
~~MIAMI FL 33156~~

13. ADDITIONAL OFFICERS AND DIRECTORS

DP
DE FERIA, DELFIN
9100 S. DADELAND BLVD #704
MIAMI, FL 33156

14.

SIGNATURE: DV 04/20/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0107389 CP

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)

1995

DOCUMENT # P94000064525 (6)

N

RESEARCH SAMPLE BANK, INC.

10796 LA REINA RD
DELRAY BEACH FL 33446

10796 LA REINA RD.
DELRAY BEACH FL 33446

(DO NOT WRITE IN THIS SPACE)

3 Date Incorporated or Qualified: 08/29/1994

3a Date of Last Report:

4 FEI Number: 65-0566373 ☐ 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/will be engaging in intrastate business in Florida as defined by s. 180.02, Florida Statutes. ☒ Yes ☐ No

21	404 S. Pompano Pkwy.	26	924 S. Pompano Pkwy
22		27	
23	Pompano Beach FL	28	Pompano Beach, FL
24	33069	25	Broward
29	33069	30	Broward

9. Name and Address of Current Registered Agent

NOLAN, WENDY
10796 LA REINA RD.
DELRAY BEACH FL 33446

10 Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. I hereby certify that the above named entity, duly formed under Florida Statutes, that desires to change its registered office or registered agent, as indicated in the statement, has authorized me, as an officer or director, to execute this statement. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

DATE

12. FURTHER ALTERATIONS:

D
NOLAN, WENDY
10796 LA REINA RD.
DELRAY BEACH FL 33446

13.

☐ Change ☐ Add/Un

☐ Change ☐ Add/Un

☐ Change ☐ Add/Un

☐ Change ☐ Add/Un

☐ Change ☐ Add/Un

☐ Change ☐ Add/Un

14. To the best of my knowledge, the undersigned signature(s) below is (are) true and genuine, as required by the corresponding statutes. For instance, a false signature submitted in connection with the filing of a document may subject the signer to criminal penalties under section 817.155, Florida Statutes. Further, to the best of my knowledge, the person(s) who signed this document knew that the signature(s) on this document would be relied upon by the Department of State in accepting this document for filing.

SIGNATURE: Wendy E Nolan WENDY E NOLAN 1/25/95 407-495-9747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

000104 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

DOCUMENT # P94000066012 (3)

GALLOWAY MEDICAL CENTER INC.

825 SW 87TH AVENUE STE. F-2
MIAMI FL 33174

825 SW 87TH AVENUE STE. F-2
MIAMI FL 33174

3. 09/08/1994

4. FEI Number 65-0518099

5. [ ] $8.75 Additional Fee Required

6. [ ] $5.00 May Be Added to Fees

8. [ ] Yes [X] No

9. Name and Address of Current Registered Agent

FERRO, ADOLFO
825 SW 87TH AVENUE STE. F-2
MIAMI FL 33174

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip

11. Pursuant to the provisions of Section 607.1622 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. I hereby certify that the corporation has authorized the officers or directors listed to execute this statement, and that the registered office and the registered agent listed below are effective upon the filing of this statement. I am familiar with and accept the obligations of my position as registered agent.

12. OFFICER AND DIRECTOR

PD
FERRO, ADOLFO
825 SW 87TH AVENUE STE. F-2
MIAMI FL 33174

SD
FERRO, MARLENE
825 SW 87TH AVENUE STE. F-2
MIAMI FL 33174

13. ADDITIONAL OFFICER AND DIRECTOR

14. I hereby certify that the information supplied with this report is true. For profit corporations, I am aware that false information submitted in a report is a misdemeanor of the first degree, punishable as provided in s. 817.155, Florida Statutes. I am also aware that I must report all changes to this information within 30 days after the change occurs in order for it to remain accurate. I understand that the annual report must be filed within the time period specified by law. Signature of a director or officer is required for the initial report. Failure to file the report on time may result in administrative dissolution of the corporation.

SIGNATURE: Marlene Ferro 4/19/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0100303 CP

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

DOCUMENT # P94000066193 (1)

DRAGON SLAYER OF TAMPA, INC.

Principal Place of Business
815 CRENSHAW LAKE ROAD
LUTZ FL 33549

Mailing Address
815 CRENSHAW LAKE ROAD
LUTZ FL 33549

3. Date Incorporated or Qualified: 09/06/1994
3a. Date of Last Report:

4. FEI Number: 59-3267321

5. Certificate of Status Desired: ✓ $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

PYLE, JAMES JR
815 CRENSHAW LAKE ROAD
LUTZ FL 33549

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83
84 City: FL 85 Zip Code:

11

12 Officers and Directors:

VD
PYLE, JAMES JR
P O BOX 888 N/A
MANGO FL 33550

P
MILLER, KIMBERLY D
815 CRENSHAW LAKE ROAD
LUTZ FL 33549

13

14

SIGNATURE: James W. Pyle VP 6/6/95 671-8706
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

CR2E034 (3/95)

0163201 FP