

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

DOCUMENT # P94000063506 (7)

For Information Only

BENJAN'S ENTERPRISES, INC.

MAY 1 1995 9:28

DEPT. OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Adding Address

**13605 JEFFERSON ST
MIAMI FL 33176**

**13605 JEFFERSON ST
MIAMI FL 33176**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Quasiest 08/29/1994	3a. Date of Last Report
4. FEI Number 65-0518030	Applies For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Finance and Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under 190.03, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERNARD, ANTHONY
16201 SW 95TH AVE SUITE 109
MIAMI FL 33157**

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

11. Pursuant to the provisions of Sections 607.09(2) and 607.10(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent or registered agent of 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 I accept the qualifications of, Section 607.09(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS, DIRECTORS, AND REGISTERED AGENTS	
12.1 NAME DP CONNOR, AUSTIN 13605 JEFFERSON ST MIAMI FL 33176	12.2 NAME DV CONNOR, JANET 13605 JEFFERSON ST MIAMI FL 33176	13.1 NAME	13.2 NAME
12.3 NAME	12.4 NAME	13.3 NAME	13.4 NAME
12.5 NAME	12.6 NAME	13.5 NAME	13.6 NAME
12.7 NAME	12.8 NAME	13.7 NAME	13.8 NAME
12.9 NAME	12.10 NAME	13.9 NAME	13.10 NAME
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12.95 NAME	12.96 NAME	13.95 NAME	13.96 NAME
12.97 NAME	12.98 NAME	13.97 NAME	13.98 NAME
12.99 NAME	12.100 NAME	13.99 NAME	13.100 NAME

14. I, the undersigned, certify that the information supplied with this filing, voluntarily furnished and does not qualify for the exemption stated in Section 190.03(2)(b), 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 each of the officers, directors, or officers of this corporation or the officers or directors employed 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 any supplemental filing with an addition.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUSTIN CONNOR

5/27/95 (605) 233-0488