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

APPROVED AND FILED

95 MAY -1 AM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000065464 (7)**

1. Corporate Name
MORALE BROTHERS PRODUCE, INC.

Principal Place of Business
3745 N.W. 98TH AVE.
CORAL SPRINGS FL 33065

Mailing Address
3745 N.W. 98TH AVE.
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

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

2. Principal Place of Business
21 Morale Brothers Produce
Suite Apt. # etc.
22 548 NE 28 CT.
City & State
23 Pompano Beach
Zip
24 33064
County
25 USA

2a. Mailing Address
26
Suite Apt. # etc.
27
City & State
28
Zip
29
County
30

4. FEI Number
65-0519565
☐ 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/will have 10 or fewer employees and is a small business as defined by 1996 Florida Statutes. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: THOMAS J. ROELL
82 Street Address (P.O. Box Number not Acceptable): 19 WEST FLAGLER ST
83 SUITE 215
84 City: MIAMI FL 85 Zip Code: 33130

11. Pursuant to the provisions of Section 607.0505 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: THOMAS J. ROELL Thomas J. Roell 4/27/95
(Typed or printed name of registered agent) (Signature of registered agent) (Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
D MORALE, EUGENE 3745 N.W. 98TH AVE. CORAL SPRINGS FL 33065	☑ Change ☐ Addition President Morale, Eugene 3745 NW98thAve Coral Springs, Fl 33065
D MORALE, GERARD 3745 N.W. 98TH AVE. CORAL SPRINGS FL 33065	☑ Change ☐ Addition Vice President Morale Gerard 17851 SW 92 CT miami, Fl. 33157
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurate and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 attachment with an address.

SIGNATURE: Eugene E Morale Eugene E Morale 4/27/95 (305) 340-0131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Area Code & Daytime Phone Number)

0108497 CP

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1995

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Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR -1 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000066066 (9)

1. Entity Name
STAR OF EBONY INVESTMENT CLUB, INC.

Principal Address	Mailing Address
4409 NORTHWEST 207TH DRIVE CAROL CITY FL 33055	4409 NORTHWEST 207TH DRIVE CAROL CITY FL 33055

(Do Not Abbreviate State Name)

3. Date Incorporation / Qualified: 09/08/1994
3a. Date of Last Report:

2. Changed Principal Address
21
22
23
24
25

2a. Mailing Address
26
27
28
29
30

4. FEI Number: 650 - 51 - 2331 ☐ 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

7. Is this corporation a small business as defined by section 288.703, Florida Statutes? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: SAMUEL JAMES JR
82 Street Address (P.O. Box Number is Not Acceptable): 505 NW 119 St Apt 219
83: CLOVER LEAF Apts
84 City: MIAMI FL 85 Zip Code: 33168

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: Samuel James Jr (Registered Agent Signature required for Agent changes)

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12
Title: P Name: THOMAS, VIVIAN L Address: 4409 NORTHWEST 207TH DRIVE City-St-Zip: CAROL CITY FL 33055	☐ Change ☐ Addition
Title: Name: Address: City-St-Zip:	☐ Change ☐ Addition
Title: Name: Address: City-St-Zip:	☐ Change ☐ Addition
Title: Name: Address: City-St-Zip:	☐ Change ☐ Addition
Title: Name: Address: City-St-Zip:	☐ Change ☐ Addition
Title: Name: Address: City-St-Zip:	☐ Change ☐ Addition

14. For profit corporations only. Did the corporation indicate on the first page that it was a subsidiary of another corporation, partnership or other business entity? If yes, was the name and address of the parent corporation, partnership or other business entity provided? Was the name and address of each corporation, partnership or other business entity owning 5% or more of the voting stock of the corporation or the name and address of the person owning 5% or more of the voting stock of the corporation required to be reported by Section 607.1508, Florida Statutes, and filing fee of $150.00 per each entity listed for the parent corporation attached with the report? ☐ Yes ☐ No

SIGNATURE: Vivian L Thomas 4-27-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0102403 CP

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CORPORATION
ANNUAL REPORT
1995

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

FILED

DOCUMENT # P94000066325 (9)

1. Corporation Name
THE ARIZONA CAFE, LTD., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1141 WILSHIRE CIRCLE EAST
PEMBROKE PINES FL 33027

Mailing Address
1141 WILSHIRE CIRCLE EAST
PEMBROKE PINES FL 33027

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/06/1994

3a. Date of Last Report:

2. Principal Place of Business
21 9740 Griffin Rd
Suite, Apt. # etc.
22 Cooper City
City & State
23 Florida
Zip: 24 33328 Country: 25 USA

2a. Mailing Address
26 Same
Suite, Apt. # etc.
27
City & State
28
Zip: 29 Country: 30

4. FEI Number: 65-0518086 — 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

9. Name and Address of Current Registered Agent

BREECE, JAIRUS
1141 WILSHIRE CIRCLE EAST
PEMBROKE PINES FL 33027

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 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

TITLE	PSTD
NAME	BREECE, JAIRUS
STREET ADDR	1141 WILSHIRE CIRCLE EAST
CITY-ST-ZIP	PEMBROKE PINES FL 33027

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition (blank entries)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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] JAIRUS BREECE 4-29-95 (305) 680 8858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0116067 CP