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 APR 27 AM 7:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000067138 (5)

1. Corporate Name

NEWLAND SPECIALTY SALES INC.

Principal Place of Business

801 S. UNIVERSITY DR., STE. 138C
PLANTATION FL 33324

Mailing Address

801 S. UNIVERSITY DR., STE. 138C
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

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

3a. Date of Last Report

4. FEI Number: 65-0514363 — Applied For / Not Applicable

2. Principal Place of Business — 2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip — Country

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 is ... Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LOPEZ, LAZARO
801 S. UNIVERSITY DR., STE. 138C
PLANTATION FL 33324

10. Name and Address of New Registered Agent

Name

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

City — FL — 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	D
NAME	LOPEZ, LAZARO
STREET ADDRESS	1150 S.W. 109TH LANE
CITY-ST-ZIP	DAVIE FL 33324
TITLE	D
NAME	LOPEZ, JOSEPHINE
STREET ADDRESS	1150 S.W. 109TH LANE
CITY-ST-ZIP	DAVIE FL 33324

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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] LAZARO J. LOPEZ April 24, 1995

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

0232932 CP