

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 26 AM 8:41

DOCUMENT # **P94000067268 (0)**

1. Corporation Name

THIRTY-SIX LAGORCE, INC.

Principal Place of Business

**C/O DAVID J. BERGER ESQ.
201 SO. BISCAYNE BLVD. STE. 3000
MIAMI FL 33131**

Mailing Address

**C/O DAVID J. BERGER ESQ.
201 SO. BISCAYNE BLVD. STE. 3000
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/13/1994

3a. Date of Last Report

4. FEI Number

65-0518887

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**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21 36 LaGorce Circle

Suite, Apt. #, etc.

22

City & State

23 Miami Beach, Florida

Zip

24 33140

Country

25 U.S.

2a. Mailing Address

26 36 LaGorce Circle

Suite, Apt. #, etc.

27

City & State

28 Miami Beach, Florida

Zip

29 33140

Country

30 U.S.

9. Name and Address of Current Registered Agent

**B & C CORPORATE SERVICES, INC.
C/O DAVID J. BERGER ESQ.
201 SO. BISCAYNE BLVD. STE. 3000
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 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

Signature, typed or printed name of registered agent and title of applicant

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **BERGER, DAVID J**
STREET ADDRESS **201 SO. BISCAYNE BLVD. STE. 3000**
CITY ST ZIP **MIAMI FL 33131**

TITLE
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CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D/V** ☒ Change ☐ Addition
1.2 NAME **Walter, Axel**
1.3 STREET ADDRESS **36 LaGorce Circle**
1.4 CITY ST ZIP **Miami Beach, Florida 33140**

2.1 TITLE **D/P/S/T** ☐ Change ☒ Addition
2.2 NAME **Walter, Johanna**
2.3 STREET ADDRESS **36 LaGorce Circle**
2.4 CITY ST ZIP **Miami Beach, Florida 33140**

3.1 TITLE **V** ☐ Change ☒ Addition
3.2 NAME **Hahn, Letha**
3.3 STREET ADDRESS **36 LaGorce Circle**
3.4 CITY ST ZIP **Miami Beach, Florida 33140**

4.1 TITLE **V** ☐ Change ☒ Addition
4.2 NAME **James, Richard Alan**
4.3 STREET ADDRESS **36 LaGorce Circle**
4.4 CITY ST ZIP **Miami Beach, Florida 33140**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

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 110.07(3)(k), 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 addition with an address.

SIGNATURE: By: **THIRTY-SIX LAGORCE, INC.**
Johanna Walter, Director

3.20.95