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 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000067678 (0)**

1. Corporation Name

THE NEW BOOTERY IV, INC.

Principal Place of Business	Mailing Address
7284 NW 54TH STREET MIAMI FL 33166	7284 NW 54TH STREET MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/14/1994

3a. Date of Last Report:

2. Principal Place of Business
21: 16590 S. Dixie Hwy
22: Suite, Apt. #, etc.
23: City & State: Miami FL
24: Zip: 33157
25: Country: USA

2a. Mailing Address
26: 16590 S. Dixie Hwy
27: Suite, Apt. #, etc.
28: City & State: Miami FL
29: Zip: 33157
30: Country: USA

4. FEI Number: 65-0521169 ☐ 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

PREVITI, PETER ESQ.
5825 SUNSET DRIVE STE. 210
SO. MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name: Michael Hanna
82 Street Address (P.O. Box Number is Not Acceptable): 16590 S. Dixie Highway
83:
84 City: Miami FL 85 Zip Code: 33157

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: x [signature] Michael Hanna 4/21/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when manually signing.) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P, D, T	☑ Change ☐ Addition
NAME	HANNA, MICHAEL P	12 NAME	Michael Hanna	
STREET ADDRESS	7284 NW 54TH STREET	13 STREET ADDRESS	16590 S. Dixie Hwy	
CITY ST ZIP	MIAMI FL 33166	14 CITY ST ZIP	Miami FL 33157	
TITLE		21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY ST ZIP		24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE	AR 5/16	☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), 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 above, or on an attachment with an address.

SIGNATURE: x [signature] Michael Hanna 4/21/95 (305) 232-9920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0180460 CP