

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 JUN 30 AM 9:39

DOCUMENT # P94000067776 (2)

1. Corporation Name

R & S ENTERPRISES OF MIAMI, FLORIDA, INC.

Principal Place of Business

**5041 N.W. 21ST AVENUE
MIAMI FL 33142**

Mailing Address

**5041 N.W. 21ST AVENUE
MIAMI FL 33142**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/15/1984

3a. Date of Last Report

4. FUTA Number

65-0544967 21152

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. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

**SOUTER, ROY
5041 N.W. 21ST AVENUE
MIAMI FL 33142**

10. Name and Address of New Registered Agent

81 Name

Roy Souter

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

2398 NW 88TH ST

83

84 City

MIAMI

FL

85

Zip Code

33147

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 Agent)

(If Registered Agent signature required when registering)

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

1

NAME

STREET ADDRESS

CITY, ST, ZIP

2

NAME

STREET ADDRESS

CITY, ST, ZIP

3

NAME

STREET ADDRESS

CITY, ST, ZIP

4

NAME

STREET ADDRESS

CITY, ST, ZIP

5

NAME

STREET ADDRESS

CITY, ST, ZIP

6

NAME

STREET ADDRESS

CITY, ST, ZIP

7

NAME

STREET ADDRESS

CITY, ST, ZIP

8

NAME

STREET ADDRESS

CITY, ST, ZIP

9

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY, ST, ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY, ST, ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY, ST, ZIP

SIGNATURE:

Roy Souter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

I hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the protection 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.

Roy Souter
Date **6/26/95** (305) **635-5227**
0101000