

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

1995



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 26 AM 8:30

DOCUMENT # **P94000070098 (6)**

D.R. JONES GROUP, INC.

113 FILEMORE DRIVE
SARASOTA FL 34236

113 FILEMORE DRIVE
SARASOTA FL 34236

21 **113 FILLMORE DR**

26 **113 FILLMORE DR**

09/20/1994

N/A

65-0527614

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

9 Name and Address of Current Registered Agent

FERRELL, HUGH C
22 S. TUTTLE AVE.
SUITE 4
SARASOTA FL 34237

10 Name and Address of New Registered Agent

PRESIDENT
JONES, DANNY R
113 FILLMORE DR
SARASOTA, FL 34236

D
JONES, DANIEL R
113 FILEMORE DRIVE
SARASOTA FL 34236

SIGNATURE:

DANNY R. JONES
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/95 (813) 388-1467

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
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PROFIT
CORPORATION
ANNUAL REPORT

1995



STATE OF FLORIDA (DEPARTMENT OF STATE)

ANNUAL REPORT

ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # P94000070603 (3)

N

HODGES & ASSOCIATES, INC.

3538 LINWOOD COURT
DELTONA FL 32738

P.O. BOX 1114
OSTEEN FL 32764

2. Annual Report Due Date		2a. Mailing Address	3. Date of Filing	3a. Date of Filing
21. 09/26/1994		26. 09/26/1994	3. 09/26/1994	3a. 09/26/1994
22. 59-3269308		27. 59-3269308	4. 59-3269308	
23. 58.75 Additional Fee Required		28. 58.75 Additional Fee Required	5. 58.75 Additional Fee Required	
24. 55.00 May Be Added to Fees		29. 55.00 May Be Added to Fees	6. 55.00 May Be Added to Fees	
25. 55.00 May Be Added to Fees		30. 55.00 May Be Added to Fees	7. 55.00 May Be Added to Fees	
26. 55.00 May Be Added to Fees		31. 55.00 May Be Added to Fees	8. 55.00 May Be Added to Fees	
27. 55.00 May Be Added to Fees		32. 55.00 May Be Added to Fees	9. 55.00 May Be Added to Fees	
28. 55.00 May Be Added to Fees		33. 55.00 May Be Added to Fees	10. 55.00 May Be Added to Fees	
29. 55.00 May Be Added to Fees		34. 55.00 May Be Added to Fees	11. 55.00 May Be Added to Fees	
30. 55.00 May Be Added to Fees		35. 55.00 May Be Added to Fees	12. 55.00 May Be Added to Fees	

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. John A. Barley
82. 400 North Meade Ave
83. Tallahassee
84. FL 32302

11. I, the undersigned, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE

Phillip L. Hodges

June 12, 1995

12. NAME AND ADDRESS OF REGISTERED AGENT	13. NAME AND ADDRESS OF NEW REGISTERED AGENT
NAME: HODGES, PHILLIP L	NAME: John A. Barley
ADDRESS: 3538 LINWOOD COURT	ADDRESS: 400 North Meade Ave
CITY: DELTONA	CITY: Tallahassee
STATE: FL	STATE: FL
ZIP: 32738	ZIP: 32302
PHONE: (407) 321-6566	PHONE: (904) 321-6566
FAX: (407) 321-6566	FAX: (904) 321-6566
E-MAIL: phodges@hda.com	E-MAIL: jbarley@barley.com
WEB: www.hda.com	WEB: www.barley.com
14. I, the undersigned, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.	14. I, the undersigned, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE:

Phillip L. Hodges PHILLIP L. HODGES

6/8/95 407-321-6566

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
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PROFIT
CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Janet B. McManamy

Secretary of State

1000 Capitol Mall, Tallahassee, FL 32304-0001

DOCUMENT # **P94000070672 (8)**

SPEEDY MULTI-SERVICES, INC.

1580 N.W. 2ND AVENUE
BOCA RATON FL 33432

1580 N.W. 2ND AVENUE
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	3a. Date of Last Report
21		26		09/19/1994	
22		27		4. FEI Number	Applied For
23		28		65-0526633	Not Applicable
24		29		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25		30		6. This corporation has liability for delinquency for under \$100,000.	\$5.00 May Be Added to Fees
				Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MUNOZ, ANTONIO
1580 N.W. 2ND AVENUE
BOCA RATON FL 33432

B1. Name	B2. P.O. Box Number (P.O. Box Number is Not Acceptable)
B3. City	B4. Zip Code
FL	

11. Pursuant to the provisions of sections 607, 608, and 609, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office. I, the undersigned, being duly authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am hereby accepting the appointment as registered agent for the corporation.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS AND DIRECTORS	
NAME	D. MUNOZ, ANTONIO 1580 N.W. 2ND AVENUE BOCA RATON FL 33432	NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

14. I hereby certify that the information supplied with this filing is substantially true and correct and does not qualify for the exemption stated in Section 607.02(3)(b), Florida Statutes. I further certify that the information is filed on the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am available for examination of the corporation or the recorder of the corporation to examine this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1 of Block 1 of the report or on an after report with an address.

SIGNATURE:

Antonio Munoz
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

6-20-95 (407) 3933115

[illegible]

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

1995

DOCUMENT # **P94000070783 (3)**

BISCAYNE AVIATION, INCORPORATED

3720 COLLINS AVE
SUITE 405
MIAMI BEACH FL 33140-4056

3720 COLLINS AVE
SUITE 405
MIAMI BEACH FL 33140-4056

09/23/1994

2		20		4	65-0560664	Applied Fee Post Application
21		26		5	\$8.75 Additional Fee Required	
22		27		6	\$5.00 May Be Added to Fees	
23		28				
24	25	29	30			

9 Name and Address of Current Registered Agent

DANTAS, PAUL M
3720 COLLINS AVE
SUITE 405
MIAMI BEACH FL 33140-4056

10 Name and Address of New Registered Agent

B1	Exhibit
B2	The [redacted] of [redacted]
B3	
B4	[redacted] FL B5 [redacted]

FL

[illegible]

Abstract

12	13
P	
DANTAS, PAUL M	
3720 COLLINS AVE SUITE 405	
MIAMI BEACH FL 33140-4056	

SIGNATURE:

Paul M. Dunbar

SIGNATURE AND TYPED OR PRINTED NAME OF RECEIVING OFFICE OR INDIVIDUAL

6/19/95 (305) 534-1874

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 4/1/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**



1995 6-26-95 B- 7525
DOCUMENT # P94000070815 (3)

SYLLA, INC.

315 E. MADISON ST.
SUITE 607
TAMPA FL 33602

315 E. MADISON ST.
SUITE 807
TAMPA FL 33602

DO NOT WRITE IN THIS SPACE

3 Date Incorporated or Qualified 09/27/1994	3a Date of Last Report
--	------------------------

FFI Number	Applied For
59-3270027	Not Applicable

5 Certificate of Status Desired **\$8.75 Additional Fee Required**

**\$5.00 May Be
Added to Fees**

B. The corporation has authority, by irrevocable law under S. 199.037, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SYLLA, CHEIKH T
315 E. MADISON ST.
SUITE 807
TAMPA FL 33602

10 Name and Address of New Registered Agent

01	Name	
02	(P.O. Box Number is Not Acceptable)	
03		
04	City	FL 85 Zip Code

11. For and on behalf of the corporation, I, James H. Hines, Jr., Florida Statutes, the above named corporation, submits this statement for the purpose of changing its registered office to the registered agent's office 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 responsibilities of Section 609.01, Florida Statutes.

1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 26

1. *Journal of the American Medical Association*, 1997; 277: 1033-1037.

1. *Phylogenetic relationships*—The phylogenetic relationships among the 10 species of *Phragmites* were determined using the maximum parsimony method. The analysis was performed using the computer program PAUP 4.0 (Swofford, 2001). The analysis was based on the 1000 characters of the DNA sequence data. The characters were ordered by increasing homoplasy index (CI) and then by increasing consistency index (CI). The analysis was performed using the following parameters: heuristic search, 1000 random addition sequences, 1000 iterations of branch swapping, and 1000 iterations of tree pruning. The results were displayed as a cladogram. The bootstrap values were calculated using 1000 randomizations. The results were displayed as a cladogram. The bootstrap values were calculated using 1000 randomizations.

[27]

12

13.

D
SYLLA, CHEIKH T
315 E. MADISON ST., SUITE 807
TAMPA FL 33602

LAST NAME	D	☐ Change
FIRST NAME	Corum, Ronald R.	
STREET ADDRESS	315 E. Madison St., Suite 807	
CITY AND STATE	Tampa, FL 33602	

D
SYLLA, CYNETTE D
315 E. MADISON ST., SUITE 807
TAMPA FL 33602

[illegible]

D
NWAGBUO, BARTHOLOMEW U
315 E. MADISON ST., SUITE 807
TAMPA FL 33602

1. 姓名: _____
 2. 性别: _____
 3. 年龄: _____
 4. 职业: _____
 5. 住址: _____
 6. 联系电话: _____
 7. 电子邮箱: _____
 8. 其他: _____

$\frac{1}{2} \log \frac{1}{2}$
 $\frac{1}{2} \log \frac{1}{2}$
 $\frac{1}{2} \log \frac{1}{2}$

[illegible]
$$b_1^2 b_2^2 b_3^2$$

$\gamma_1 = \gamma_1^1$	☐ Change
$\gamma_2 = \gamma_2^1$	
$\gamma_3 = \gamma_3^1$	
$\gamma_4 = \gamma_4^1$	

$$\begin{aligned} & \{ \mathbf{1} \} \\ & \{ \mathbf{1}, \mathbf{5}, \mathbf{1} \} \\ & \{ \mathbf{1}, \mathbf{6}, \mathbf{15}, \mathbf{6}, \mathbf{1} \} \\ & \{ \mathbf{1}, \mathbf{7}, \mathbf{21}, \mathbf{35}, \mathbf{21}, \mathbf{7}, \mathbf{1} \} \end{aligned}$$

$\psi_1 = \frac{1}{\sqrt{2}}(\psi_{11} + \psi_{12})$	$\psi_2 = \frac{1}{\sqrt{2}}(\psi_{11} - \psi_{12})$
$\psi_3 = \frac{1}{\sqrt{2}}(\psi_{21} + \psi_{22})$	$\psi_4 = \frac{1}{\sqrt{2}}(\psi_{21} - \psi_{22})$
$\psi_5 = \frac{1}{\sqrt{2}}(\psi_{31} + \psi_{32})$	$\psi_6 = \frac{1}{\sqrt{2}}(\psi_{31} - \psi_{32})$
$\psi_7 = \frac{1}{\sqrt{2}}(\psi_{41} + \psi_{42})$	$\psi_8 = \frac{1}{\sqrt{2}}(\psi_{41} - \psi_{42})$

14. In particular, clearly that the information supplied to this body is voluntarily furnished and does not qualify for the exemption stated in New York 239 (1972) (b)(3). Florida Statutes Chapter 239, which states that the information must be obtained from the general report or supplemental demand report is true and the statute does not say that any information shall have the same legal effect as if made known to that party or officer or member of the organization or the recipient of the request or highest representative to execute this request as required by Chapter 239. Florida Statutes, and that this statute means that the body to which this information is voluntarily furnished will not be held liable.

SIGNATURE:

Chetk T. Sylla

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/95

¹ *Supra* note 1, at 105, 106.

00079901 CE

CR2E034 (3/95)

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT**

1995



FLORIDA DEPARTMENT OF STATE

Barbara B. Matthews

Secretary of State

1900 BANKERS BUILDING, SUITE 1000, JACKSONVILLE, FL 32202

DOCUMENT # P94000070843 (5)

1. Corporation Name

THE MOUNTAIN, INC.

2. Principal Place of Business

**3400 S. DIXIE HIGHWAY
MIAMI FL 33133**

2a. Mailing Address

**3400 S. DIXIE HIGHWAY
MIAMI FL 33133**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/27/1994

3a. Date of Last Report

2. Principal Place of Business

21 Rt. 15

2a. Mailing Address

26 P.O. Box D

4. FEI Number

01 0495432

Applied For

Not Applicable

State Apt. # etc.

State Apt. # etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23 Greenville, ME

City & State

28 Greenville, ME

6

☐ \$5.00 May Be
Added to Fees

Zip

24 04441

Zip

29 04441

8. This corporation has liability for intangible tax under s. 196, U.S.C., Florida Statutes.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301**

B1 Name

B2 (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1506, 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 of Registered Agent or Registered Agent Accepting Appointment)

(Signature of Registered Agent Accepting Appointment)

(Date)

12. OFFICERS AND DIRECTORS

**12.1 NAME: P CONZALONE, JAMES
12.2 STREET ADDRESS: 3400 S. DIXIE HIGHWAY
12.3 CITY & STATE: MIAMI FL 33133**

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14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 of this filing, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/95

443-4444

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

1995



DOCUMENT # P94000071165 (2)

AMERICAN OIL CO. OF SOUTH FLORIDA, INC.

3701 NW 167 STREET
OPA LOCKA FL 33055

3701 NW 167 STREET
OPA LOCKA FL 33055

2	2a	3	3a
21	26	09/26/1994	
22	27	65-0525673	
23	28		\$8.75 Additional Fee Required
24	29		\$5.00 May Be Added to Fees
	30		

9. Name and Address of Current Registered Agent

SOSA, ORLANDO
3101 SW 102 AVENUE
MIAMI FL 33165

10. Name and Address of New Registered Agent

81	82	83	84	85
				FL

11. I, the undersigned, do hereby certify that the foregoing information is true and correct, and that the same is in accordance with the provisions of the laws of the State of Florida, and that the same is in accordance with the provisions of the laws of the State of Florida, and that the same is in accordance with the provisions of the laws of the State of Florida.

12	13
D SOSA, ORLANDO 3101 SW 102 AVENUE MIAMI FL 33165 D SOSA, SABINO 3101 SW 102 AVENUE MIAMI FL 33165	

CR2E034 (3/95)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

61995

305-623-3101