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 MAR 27 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000071858 (2)**

1. Corporation Name
BITS & PIECES INC.

Principal Place of Business	Mailing Address
366 FORESTA TERRACE W. PALM BEACH FL 33415	366 FORESTA TERRACE W. PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/26/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 328, DYER ROAD	26 328, DYER ROAD
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: WEST PALM BEACH, FL.	28 City & State: WEST PALM BEACH, FL.
24 Zip: 33405 25 Country: U.S.A.	29 Zip: 33405 30 Country: U.S.A.

4. FEI Number: 65-0537952 ☐ 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	10. Name and Address of New Registered Agent
GODDARD, HOWARD 366 FORESTA TERRACE W. PALM BEACH FL 33415	81 Name: GODDARD, HOWARD 82 Street Address (P.O. Box Number is Not Acceptable): 328 DYER ROAD 83 84 City: WEST PALM BEACH FL 85 Zip Code: 33405

11. Pursuant to the provisions of Section 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: _____ H. GODDARD 3-21-95
Signature, typed or printed name of individual and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☑ Change ☐ Addition
NAME	GODDARD, LISA D	12 NAME	
STREET ADDRESS	366 FORESTA TERRACE	13 STREET ADDRESS	328, DYER ROAD
CITY-ST-ZIP	W. PALM BEACH FL 33415	14 CITY-ST-ZIP	WEST PALM BEACH, FL. 33405
TITLE	D	21 TITLE	☑ Change ☐ Addition
NAME	GODDARD, HOWARD	22 NAME	
STREET ADDRESS	366 FORESTA TERRACE	23 STREET ADDRESS	328 DYER ROAD
CITY-ST-ZIP	W. PALM BEACH FL 33415	24 CITY-ST-ZIP	WEST PALM BEACH, FL. 33405
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	☐ 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 truthfully furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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: _____ H. GODDARD 3.21.95 (407)833-7178
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Telephone Number