

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

APPROVED
AND
FILED

1995 JAN 20 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000072513 (2)

1. Corporation Name

L.M.H. INVESTMENTS, INC.

Principal Place of Business

7441 N TAMiami TRAIL
SARASOTA FL 34243

Mailing Address

7441 N TAMiami TRAIL
SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/03/1994

3a. Date of Last Report

2. Principal Place of Business

21 2801 Fruitville Rd.

2a. Mailing Address

26 2801 Fruitville Rd.

4. FEI Number

65-0540295

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite 260

Suite, Apt. #, etc.

27 Suite 260

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

City & State

23 Sarasota, FL

City & State

28 Sarasota, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 34237

Country

25 USA

Zip

29 34237

Country

30 USA

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

9. Name and Address of Current Registered Agent

PATRICK, CARL E
7441 N TAMiami TRAIL
SARASOTA FL 34243

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 if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

0

NAME

HO, CHARLES

STREET ADDRESS

7441 N TAMiami TRAIL

CITY - ST - ZIP

SARASOTA FL 34243

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D/P/C

☒ Change

☐ Addition

1.2 NAME

Ho, Charles

1.3 STREET ADDRESS

2801 Fruitville Rd, Ste. 260

1.4 CITY - ST - ZIP

Sarasota, FL 34237

2.1 TITLE

D/V

☐ Change

☒ Addition

2.2 NAME

maschino, Rose

2.3 STREET ADDRESS

2801 Fruitville Rd, Ste. 260

2.4 CITY - ST - ZIP

Sarasota, FL 34237

3.1 TITLE

SH

☐ Change

☒ Addition

3.2 NAME

Castro, melissa

3.3 STREET ADDRESS

2801 Fruitville Rd, Ste. 260

3.4 CITY - ST - ZIP

Sarasota, FL 34237

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

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

SCC 1-24-95

14. I do hereby 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 attachment with an address.

SIGNATURE:

Charles Ho
Charles Ho Director

1/12/95 813-951-6987