

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995

5-1-95



FLORIDA DEPARTMENT OF STATE

Sandra B. Matham

8-5570-01

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000079765 (1)

1. Corporation Name

DAVID ONSTAD, INC.

Principal Place of Business

5901 N.E. 21ST LANE
FORT LAUDERDALE FL 33306

Mailing Address

5901 N.E. 21ST LANE
FORT LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1994

3a. Date of Last Report

4. FEI Number

65-0545549

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 194.036,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

City & State

28

City & State

24

City & State

25

City & State

29

City & State

30

City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ONSTAD, DAVID
5901 N.E. 21ST LANE
FORT LAUDERDALE FL 33306

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 607.0507 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 of Agent) (Signature of Registered Agent) (Signature of Registered Agent)

(Signature of Agent) (Signature of Registered Agent) (Signature of Registered Agent)

(Signature of Agent)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14	D
NAME	ONSTAD, DAVID
STREET ADDRESS	5901 N.E. 21ST LANE
CITY, ST, ZIP	FORT LAUDERDALE FL 33306
15	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
16	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
17	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
18	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
19	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
15 TITLE	☐ Change ☐ Addition
16 NAME	
17 STREET ADDRESS	
18 CITY, ST, ZIP	
19 TITLE	☐ Change ☐ Addition
20 NAME	
21 STREET ADDRESS	
22 CITY, ST, ZIP	
23 TITLE	☐ Change ☐ Addition
24 NAME	
25 STREET ADDRESS	
26 CITY, ST, ZIP	
27 TITLE	☐ Change ☐ Addition
28 NAME	
29 STREET ADDRESS	
30 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
35 TITLE	☐ Change ☐ Addition
36 NAME	
37 STREET ADDRESS	
38 CITY, ST, ZIP	
39 TITLE	☐ Change ☐ Addition
40 NAME	
41 STREET ADDRESS	
42 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 139.027(5)(a), Florida Statutes. I further certify that the information included 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. This filing is a public record of the corporation or the record of business incorporated by statute in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID

5.

ONSTAD

4/27/95

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