

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

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
32399-0001

APPROVED
FILED

APR 12 PM 2:04
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000080620 (5)

ANDREAS INTERNATIONAL OF WPB, INC.

Principal Office Address: **2359 OAK TREE LANE
WEST PALM BEACH FL 33409**
Mailing Address: **2359 OAK TREE LANE
WEST PALM BEACH FL 33409**

DO NOT WRITE IN THIS SPACE

3. Date first organized or qualified 11/02/1994		3a. Date of Last Report	
4. FFI Number		☒ Applied For ☐ Not Applicable	
2. Principal Office City, State, and Zip 21 West Palm Beach, FL 33409	2a. Mailing Address City, State, and Zip 26 West Palm Beach, FL 33409	5. Certificate of Status Debenture ☐	\$8.75 Additional Fee Required
22. City & State 22 West Palm Beach, FL	27. City & State 27 West Palm Beach, FL	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
23. City & State 23 West Palm Beach, FL	28. City & State 28 West Palm Beach, FL	8. Does corporation have liability for intermarriage under S. 190.01(2) Florida Statutes ☐ Yes ☒ No	
24. City & State 24 West Palm Beach, FL	25. City & State 25 West Palm Beach, FL	29. City & State 29 West Palm Beach, FL	30. City & State 30 West Palm Beach, FL

9. Name and Address of Current Registered Agent ZARETSKY, LOUIS D 6345 COLLINS AVE. SUITE 100 MIAMI BEACH FL 33141		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable) 555 NE 15th Street, Suite 100	
83. City		84. City Miami	
85. Zip Code 33132		86. Zip Code FL 33132	

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3), 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 the registered agent under Florida Statutes.

SIGNATURE: *[Signature]* DATE: **April 6th 1995**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME DPST CANIVEL, MARIA O 2359 OAK TREE LANE WEST PALM BEACH FL 33409	1. NAME CANIVEL, MARIA O	2. NAME CANIVEL, MARIA O	☐ Change ☐ Addition
NAME	3. NAME	4. NAME	☐ Change ☐ Addition
NAME	5. NAME	6. NAME	☐ Change ☐ Addition
NAME	7. NAME	8. NAME	☐ Change ☐ Addition
NAME	9. NAME	10. NAME	☐ Change ☐ Addition
NAME	11. NAME	12. NAME	☐ Change ☐ Addition
NAME	13. NAME	14. NAME	☐ Change ☐ Addition
NAME	15. NAME	16. NAME	☐ Change ☐ Addition
NAME	17. NAME	18. NAME	☐ Change ☐ Addition
NAME	19. NAME	20. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information requested on this filing was voluntarily furnished and does not qualify for the exemption stated in Section 190.01(2) Florida Statutes. Further, I certify that the information is true and correct, and that my signature shall have the same legal effect as if made under oath. I am not a director or officer of the corporation and I am not a shareholder of the corporation. I am not a person who is prohibited from conducting business with the corporation under Florida Statutes. I am not a person who is prohibited from conducting business with the corporation under Florida Statutes. I am not a person who is prohibited from conducting business with the corporation under Florida Statutes.

SIGNATURE: *[Signature]* **President** **4/6/95**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
JENNIFER B. MONTGOMERY
GOVERNOR
CORPORATION OF FLORIDA

APPROVED
AND
FILED

DOCUMENT # P94000082583 (3)

1. Corporation Name

CELLCITY, CORP.

Principal Place of Business
**19499 NE 10TH AVE., #301
N. MIAMI BEACH FL 33179**

Mailing Address
**19499 NE 10TH AVE., #301
N. MIAMI BEACH FL 33179**

DECLARATION OF OFFICERS

SECRETARY
TREASURER

DO NOT WRITE IN THIS SPACE

3. Date Received or Checklist 11/09/1994	3a. Date of Last Report
4. Filing Number 65-0534/68	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Fixed Fund Contribution ☐	\$5.00 May Be Added to Fees
8. Does corporation have liability for a foreign tax credit? (Section 1361) Florida Statute: ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State Art # etc	26. State Art # etc
22. City & State	27. City & State
23. Age	28. Age
24. Age	29. Age
25. Age	30. Age

9. Name and Address of Current Registered Agent

**CUENTRO, KARINA
19499 NE 10TH AVE., #301
N. MIAMI BEACH FL 33179**

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 607.01(2)(c) and 607.15(4)(b) Florida Statutes, the above named corporation certifies the 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 607.01(2)(c) Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent in Charge

Signature of New Registered Agent or Registered Agent in Charge

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	1. NAME
2. STREET ADDRESS	2. NAME
3. CITY & STATE	3. STREET ADDRESS
4. CITY & STATE	4. CITY & STATE
5. CITY & STATE	5. CITY & STATE
6. CITY & STATE	6. CITY & STATE
7. CITY & STATE	7. CITY & STATE
8. CITY & STATE	8. CITY & STATE
9. CITY & STATE	9. CITY & STATE
10. CITY & STATE	10. CITY & STATE
11. CITY & STATE	11. CITY & STATE
12. CITY & STATE	12. CITY & STATE
13. CITY & STATE	13. CITY & STATE
14. CITY & STATE	14. CITY & STATE
15. CITY & STATE	15. CITY & STATE
16. CITY & STATE	16. CITY & STATE
17. CITY & STATE	17. CITY & STATE
18. CITY & STATE	18. CITY & STATE
19. CITY & STATE	19. CITY & STATE
20. CITY & STATE	20. CITY & STATE

13. ADDITIONS TO AND DELETIONS FROM OFFICERS AND DIRECTORS IN 12

PRESIDENT ☐ Change ☒ Addition

KARINA CUENTRO

19499 NE 10TH AVE # 301

N. MIAMI BEACH FL 33179 ☐ Change ☒ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 194.01(2)(b) Florida Statutes. I have verified that the information included in the 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 hereto with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR