

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 25 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000084216 (8)

1. Corporation Name

U.S. LEGAL FORMS, INC.

Principal Place of Business

2699 STIRLING ROAD, SUITE C-407
FT. LAUDERDALE FL 33312

Mailing Address

2699 STIRLING ROAD, SUITE C-407
FT. LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/15/1994

3a. Date of Last Report

4. FEI Number
65-0535120

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

7. Has corporation been liable for delinquency under R. 100.010
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TISHMAN, WILLIAM J
72 IVY ROAD
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

B1 Name

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

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0501 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 Registered Agent (Registered Agent must be a natural person)

Signature of Agent (Agent must be a natural person)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PST
VAUGHTER, DARRELL
1245 NORTH WAY
WINTER SPRINGS FL 32708

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

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE

15 NAME

16 STREET ADDRESS

17 CITY, ST, ZIP

PST
DARRELL J VAUGHTER
1125 CYPHER SUITE 101
KINGSVILLE TX 78363

☒ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

500001501055
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****225.00 ****225.00

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

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 119.03(1)(b) Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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:

Darrell J. Vaughter

DARRELL J. VAUGHTER

5-15-95

512-572-9775