FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

AMENDED P 1.25

CORPORATION ANNUAL REPORT **1995**

FLA. DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
95 JUL 19 PM 8:47
FLA. DEPT. OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000085761

1. Current Name
Transfer Unlimited, Inc.

700001545297
-07/25/95--01058--023
*****61.25 *****61.25
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1840 West 49 St. Suite #713 Hialeah, Fl. 33012	1840 West 49 Street Suite #713 Hialeah, Fl. 33012

3. Date Incorporated or Qualified: 11-28-94
3a. Date of Last Report: 1-25-95

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite Apt. # etc. (22) (27)
City & State (23) (28)
Zip (24) County (25) Zip (29) County (30)

4. FEI Number: 65-0536952 ☐ 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 § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Sibert, Julia 1840 West 49 Street Suite #713 Hialeah, Fl. 33012	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 607.0505 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

12. OFFICER AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IN ??
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Trustee Sibert, Julia 1840 West 49 Street #713 Hialeah, Fl. 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Ex-V. DELETE Rodriguez, Jose 1840 West 49 Street #713 Hialeah, Fl. 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP T/S, 7/19/95	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is knowingly 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 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 1, or Block 11 changed, or added, above.

SIGNATURE: Julia Sibert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julia Sibert 7-11-95 (305)819-0906
Date Daytime Phone #