

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathias
Secretary of State
Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000089460 (7)

TRACY A. FRACASSO, C.P.A., P.A.

From Agent of the Corporation: 2675 NW 95TH AVE.
CORAL SPRINGS FL 33065

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CORAL SPRINGS FL 33065

(If Filing Agent, Write in This Space)

3. Date Information is Current: 12/09/1994		3a. Date of Last Report	
4. FEIN Number: 65-0539875		Applied For: ☐ Not Applicable: ☐	
5. Certificate of Status (Current): ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing: ☐		\$5.00 May Be Added to Fees	
7. Filing Agent's Signature: ☒ Yes ☐ No		Florida Statutes: ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

RICHARD GOLDSTONE, P.A.
2300 W. SAMPLE RD.
SUITE 202
POMPANO BEACH FL 33073

10. Name and Address of New Registered Agent

81 Name
82 Street Address (If City Box Number is Not Applicable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 602, 603, and 607, 1900, Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office (or registered agent) in both in the State of Florida. Such change was authorized by the corporation's board of directors, through, except the appointment of a registered agent, I am certifying with and accept the obligations of Section 607, 1900, Florida Statutes.

SIGNATURE

(If Filing Agent, Signature of the Filing Agent is Not Applicable)

(If Filing Agent, Signature of the Filing Agent is Not Applicable)

ALL

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1.	
1. NAME	FRACASSO, TRACY A	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	2875 NW 95TH AVE.	2. STREET ADDRESS	☐ Change ☐ Addition
3. CITY	CORAL SPRINGS FL 33065	3. CITY	☐ Change ☐ Addition
4. NAME		4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS		5. STREET ADDRESS	☐ Change ☐ Addition
6. CITY		6. CITY	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	☐ Change ☐ Addition
9. CITY		9. CITY	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	☐ Change ☐ Addition
12. CITY		12. CITY	☐ Change ☐ Addition
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	☐ Change ☐ Addition
15. CITY		15. CITY	☐ 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 (Section 607, 1900, 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 is available on or after the date of this corporation or the officer or director empowered to execute this report, as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1.0, changed, or on an attachment with an address.

SIGNATURE: *Tracy Fracasso* Tracy A. Fracasso 4/30/95 (305) 346-4429
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR