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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Donna H. Abshier
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUN 30 AM 7:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000091428

(1)

1. Corporation Name

YOU BETTER THAN ME, INC.

Principal Place of Business

**100 S.E. Second St., #2750
Miami, FL 33131**

Legal Address

**100 S.E. Second St., #2750
Miami, FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

12/14/94

3a. Date of Last Report

4. FID Number

65-0571051

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 S. 109.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**David M. Goldstein
100 S.E. Second Street
Suite 2750
Miami, Florida 33131**

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 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature typed or printed below of my (self, agent, and the 3 applicable)

(Print Name of Agent registered (copied when married))

DATE

OFFICERS AND DIRECTORS

12

13

NAME

14 STREET ADDRESS

15 CITY ST ZIP

16

NAME

17 STREET ADDRESS

18 CITY ST ZIP

19

NAME

20 STREET ADDRESS

21 CITY ST ZIP

22

NAME

23 STREET ADDRESS

24 CITY ST ZIP

25

NAME

26 STREET ADDRESS

27 CITY ST ZIP

28

NAME

29 STREET ADDRESS

30 CITY ST ZIP

31

NAME

32 STREET ADDRESS

33 CITY ST ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

Pres., Sec.-Treas & Dir.

☒ Change ☐ Addition

12 NAME

Szabo, Zsuzsanne

13 STREET ADDRESS

3025 N.E. 188 Street

14 CITY ST ZIP

N. Miami Beach, FL 33180

☐ Change ☐ Addition

15

16 NAME

900001531053

17 STREET ADDRESS

-07/06/95--01064--022

18 CITY ST ZIP

*****225.00 ***225.00**

☐ Change ☐ Addition

19

20 NAME

21

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

☐ Change ☐ Addition

25

26 NAME

27 STREET ADDRESS

28 CITY ST ZIP

☐ Change ☐ Addition

29

30 NAME

31 STREET ADDRESS

32 CITY ST ZIP

☐ Change ☐ Addition

33

34 NAME

35 STREET ADDRESS

36 CITY ST ZIP

☐ Change ☐ Addition

RC

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 110.07(3)(b), 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 12 or Block 13 (changed), or as an attachment with no address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

Zsuzsanne Szabo, President

6/20/95