

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P95000000166 (5)

1. Corporation Name

ANORTHITE OF FLORIDA, INC.

Principal Place of Business
ONE SE THIRD AVE. 1400
MIAMI FL 33131

Mailing Address
ONE SE THIRD AVE. 1400
MIAMI FL 33131

APPROVED
AND
FILED
95 MAR -3 PM 3: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/30/1994

3a. Date of Last Report

4. FEI Number

☒ 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. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

2a Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

29 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COPROLITE CORPORATION
ONE SE THIRD AVE, 1400
1400A SUNBANK INTERNATIONAL CTR.
MIAMI FL 33131

01 Name

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

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agent and the if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	JACKSON, CARLA
STREET ADDRESS	ONE SE THIRD AVE, 1400
CITY-ST-ZIP	MIAMI FL 33131
TITLE	D
NAME	CALVERT, YVONNE
STREET ADDRESS	ONE SE THIRD AVE, 1400
CITY-ST-ZIP	MIAMI FL 33131
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

1.1 TITLE	D/P/T	☒ Change ☐ Addition
1.2 NAME	FUHRMANN, PETER	
1.3 STREET ADDRESS	515 EAST LAS OLAS BLVD, #950	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301	
2.1 TITLE	DN/S	☒ Change ☐ Addition
2.2 NAME	STERNLIEB, HERBERT H.	
2.3 STREET ADDRESS	515 EAST LAS OLAS BLVD, #950	
2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 in an attachment with an address.

SIGNATURE:

Herbert H. Sternlieb

Herbert H. Sternlieb

7/16/95

305-528-1040