

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P95-000048225**

1. Corporation Name

*Miami Bail Bonds, Inc.*

Principal Place of Business

Mailing Address

*c/o Sharon McConnell  
1850 SW 8 St. #312  
Miami, FL 33135*

*c/o Sharon McConnell  
1850 SW 8 St. #312  
Miami, FL 33135*

*new co.*

3. Date Incorporated or Qualified

*6/19/95*

3a. Date of Last Report

*65-0604758*

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

*65-0604758*

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

*Lewis, Richard C.  
799 Brickell Plaza  
Suite 702  
Miami, FL 33131*

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 607.0502 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME *P/O Sharon McConnell* ☐ DELETE  
STREET ADDRESS *1850 SW 8 St. #312*  
CITY-ST-ZIP *Miami, FL 33135*

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE ☐ DELETE

7.1 TITLE ☐ Change ☐ Addition

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-ST-ZIP

TITLE ☐ DELETE

8.1 TITLE ☐ Change ☐ Addition

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-ST-ZIP

TITLE ☐ DELETE

9.1 TITLE ☐ Change ☐ Addition

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY-ST-ZIP

TITLE ☐ DELETE

10.1 TITLE ☐ Change ☐ Addition

10.2 NAME

10.3 STREET ADDRESS

10.4 CITY-ST-ZIP

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11.1 TITLE ☐ Change ☐ Addition

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

TITLE ☐ DELETE

12.1 TITLE ☐ Change ☐ Addition

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

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13.1 TITLE ☐ Change ☐ Addition

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13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

TITLE ☐ DELETE

14.1 TITLE ☐ Change ☐ Addition

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14.3 STREET ADDRESS

14.4 CITY-ST-ZIP

TITLE ☐ DELETE

15.1 TITLE ☐ Change ☐ Addition

15.2 NAME

15.3 STREET ADDRESS

15.4 CITY-ST-ZIP

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16.1 TITLE ☐ Change ☐ Addition

16.2 NAME

16.3 STREET ADDRESS

16.4 CITY-ST-ZIP

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17.1 TITLE ☐ Change ☐ Addition

17.2 NAME

17.3 STREET ADDRESS

17.4 CITY-ST-ZIP

TITLE ☐ DELETE

18.1 TITLE ☐ Change ☐ Addition

18.2 NAME

18.3 STREET ADDRESS

18.4 CITY-ST-ZIP

TITLE ☐ DELETE

19.1 TITLE ☐ Change ☐ Addition

19.2 NAME

19.3 STREET ADDRESS

19.4 CITY-ST-ZIP

TITLE ☐ DELETE

20.1 TITLE ☐ Change ☐ Addition

20.2 NAME

20.3 STREET ADDRESS

20.4 CITY-ST-ZIP

TITLE ☐ DELETE

21.1 TITLE ☐ Change ☐ Addition

21.2 NAME

21.3 STREET ADDRESS

21.4 CITY-ST-ZIP

TITLE ☐ DELETE

22.1 TITLE ☐ Change ☐ Addition

22.2 NAME

22.3 STREET ADDRESS

22.4 CITY-ST-ZIP

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23.1 TITLE ☐ Change ☐ Addition

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23.3 STREET ADDRESS

23.4 CITY-ST-ZIP

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24.1 TITLE ☐ Change ☐ Addition

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24.4 CITY-ST-ZIP

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25.1 TITLE ☐ Change ☐ Addition

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25.4 CITY-ST-ZIP

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26.1 TITLE ☐ Change ☐ Addition

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26.4 CITY-ST-ZIP

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27.1 TITLE ☐ Change ☐ Addition

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27.4 CITY-ST-ZIP

TITLE ☐ DELETE

28.1 TITLE ☐ Change ☐ Addition

28.2 NAME

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28.4 CITY-ST-ZIP

TITLE ☐ DELETE

29.1 TITLE ☐ Change ☐ Addition

29.2 NAME

29.3 STREET ADDRESS

29.4 CITY-ST-ZIP

TITLE ☐ DELETE

30.1 TITLE ☐ Change ☐ Addition

30.2 NAME

30.3 STREET ADDRESS

30.4 CITY-ST-ZIP

TITLE ☐ DELETE

31.1 TITLE ☐ Change ☐ Addition

31.2 NAME

31.3 STREET ADDRESS

31.4 CITY-ST-ZIP

SIGNATURE:

*Sharon McConnell* Sharon McConnell 5/24/96 305-541-5050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)