

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # S23901 (9)

1. Corporation Name

OCEANIA CONTRACTOR, INC.

95 JUL -3 AM 8:37

Principal Place of Business

**16425 COLLINS AVE
MIAMI BEACH FL 33160**

Mailing Address

**16425 COLLINS AVE
MIAMI BEACH FL 33160**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/09/1991

3a. Date of Last Report

07/18/1994

4. FID Number

65-0237407

Agreement Fee

Not Applicable

5. Certificate of Status (Desired)

☐ \$8.75 Additional
Fee Required

6. Certificate of Status (Actual)

☐ \$5.00 May Be
Added to Fees

8. The corporation has liability for information for calendar year 1994 (1995)
 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 16320 Collins Ave

2a. Mailing Address

20 16320 Collins Ave.

State Apt # etc

State Apt # etc

City & State

23 Miami Beach, Fl.

City & State

20 Miami Beach, Fl.

Zip

24 33160

Zip

29 33160

City & State

9. Name and Address of Current Registered Agent

**PANKOW, GERALD R.
16485 COLLINS AVENUE
MIAMI BEACH FL 33160**

10. Name and Address of New Registered Agent

81 Name

82 Street & Apt. # P.O. Box Number or Post Office Address

16320 Collins Ave

83

84 City

Miami Beach

FL

85 Zip Code **33160**

11. Paragraph 1, the provisions of Sections 607 (5)(b) and 607 (1)(b) Florida Statutes, this corporation certifies the statement for the purpose of filing with the 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 provisions of Section 607 (5)(b) Florida Statutes.

12. OFFICERS AND DIRECTORS

12.1	DV	KLEIKAMP, GERTI
NAME		16485 COLLINS AVE
STREET ADDRESS		MIAMI BEACH FL
CITY & STATE		
12.2	DT	PANKOW, GERALD
NAME		16485 COLLINS AVENUE
STREET ADDRESS		MIAMI BEACH FL
CITY & STATE		
12.3	DP	MINNIGER, GUNTHER DR.
NAME		GERMANICUSSTRASSE 8.500
STREET ADDRESS		KOLN FIFTY-ONE-GERMA
CITY & STATE		
12.4		
NAME		
STREET ADDRESS		
CITY & STATE		
12.5		
NAME		
STREET ADDRESS		
CITY & STATE		
12.6		
NAME		
STREET ADDRESS		
CITY & STATE		

13.1	DV	X Change	Action
NAME		GERTI KLEIKAMP	
STREET ADDRESS		16445 COLLINS AV.	
CITY & STATE		MIAMI BEACH, FL. 33160	
13.2	DT	X Change	Action
NAME		GERALD PANKOW	
STREET ADDRESS		16445 COLLINS AV.	
CITY & STATE		MIAMI BEACH, FLORIDA 33160	
13.3	DP	X Change	Action
NAME		DANIEL E. WHITEMAN	
STREET ADDRESS		16445 COLLINS AV.	
CITY & STATE		MIAMI BEACH, FLORIDA 33160	
13.4			
NAME			
STREET ADDRESS			
CITY & STATE			
13.5			
NAME			
STREET ADDRESS			
CITY & STATE			
13.6			
NAME			
STREET ADDRESS			
CITY & STATE			

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139 (2)(b) Florida Statutes. I further certify that the information indicated on this report is true and correct and that my signature (s) has the same legal effect as a sworn statement. 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 of this report as indicated with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Gerald Pankow

6/28/95