

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S41195** (6)

1. Corporation Name

MICHAEL J. BARNA, INC.

APPROVED
AND
FILED

95 MAY 23 14:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**3315 NE 16TH ST
FT LAUDERDALE 33304**

**3315 NE 16TH ST
FT LAUDERDALE 33304**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Quasi

03/27/1991

3a. Date of Last Report

02/24/1994

4. FEI Number

65-0000655

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**

9. This corporation has liability for which the state of Florida is liable for Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**BARNA, MICHAEL J.
3315 NE 16TH ST
FT LAUDERDALE FL 33304**

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 607.01(2) and 607.15(8) Florida Statutes, the above named corporation submits 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. I hereby accept the appointment as registered agent. I am familiar with and accept the conditions of Sections 607.01(2) and 607.15(8) Florida Statutes.

SIGNATURE

(Signature of the person making the change is required)

(Signature of Registered Agent is required)

Date

12. OFFICERS AND DIRECTORS

12a. NAME	D BARNA, MICHAEL J.
12b. STREET ADDRESS	3315 NE 16TH ST
12c. CITY, ST, ZIP	FT LAUDERDALE FL
12d. TITLE	
12e. NAME	
12f. STREET ADDRESS	
12g. CITY, ST, ZIP	
12h. NAME	
12i. STREET ADDRESS	
12j. CITY, ST, ZIP	
12k. NAME	
12l. STREET ADDRESS	
12m. CITY, ST, ZIP	
12n. NAME	
12o. STREET ADDRESS	
12p. CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13a. TITLE	☐ Change ☐ Addition
13b. NAME	
13c. STREET ADDRESS	
13d. CITY, ST, ZIP	
13e. TITLE	☐ Change ☐ Addition
13f. NAME	
13g. STREET ADDRESS	
13h. CITY, ST, ZIP	
13i. TITLE	☐ Change ☐ Addition
13j. NAME	
13k. STREET ADDRESS	
13l. CITY, ST, ZIP	
13m. TITLE	☐ Change ☐ Addition
13n. NAME	
13o. STREET ADDRESS	
13p. CITY, ST, ZIP	
13q. TITLE	☐ Change ☐ Addition
13r. NAME	
13s. STREET ADDRESS	
13t. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b) 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. That I am an officer or director of the corporation or the person or persons 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 filing. I am changed or an addition with an address.

SIGNATURE:

Michael J. Barna

Michael J. Barna

5/15/95 (405) 563 2719

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

APPROVED

FILED

MAY 23 1995

RECEIVED

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S45668** (8)

1. Corporation Name

NEW SOUTHERN ELECTRIC, INC.

Principal Place of Business

**6038 SHEELIN DR
NEW PORT RICHEY FL 34653**

Mailing Address

**P. O. BOX 233
PORT RICHEY FL 34673
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or (2) prior

04/15/1991

3a. Date of Last Report

07/26/1994

2. Principal Place of Business

21 11341 STANSBERRY DR.

2b. Mailing Address

26

4. FCI Number

59-3062693

Applied For

Not Applicable

City & State

22 PORT RICHEY, FL

City & State

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23 34668

City & State

28

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability or contingent liability to (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (30) (31) (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100) (101) (102) (103) (104) (105) (106) (107) (108) (109) (110) (111) (112) (113) (114) (115) (116) (117) (118) (119) (120) (121) (122) (123) (124) (125) (126) (127) (128) (129) (130) (131) (132) (133) (134) (135) (136) (137) (138) (139) (140) (141) (142) (143) (144) (145) (146) (147) (148) (149) (150) (151) (152) (153) (154) (155) (156) (157) (158) (159) (160) (161) (162) (163) (164) (165) (166) (167) (168) (169) (170) (171) (172) (173) (174) (175) (176) (177) (178) (179) (180) (181) (182) (183) (184) (185) (186) (187) (188) (189) (190) (191) (192) (193) (194) (195) (196) (197) (198) (199) (200) (201) (202) (203) (204) (205) (206) (207) (208) (209) (210) (211) (212) (213) (214) (215) (216) (217) (218) (219) (220) (221) (222) (223) (224) (225) (226) (227) (228) (229) (230) (231) (232) (233) (234) (235) (236) (237) (238) (239) (240) (241) (242) (243) (244) (245) (246) (247) (248) (249) (250) (251) (252) (253) (254) (255) (256) (257) (258) (259) (260) (261) (262) (263) (264) (265) (266) (267) (268) (269) (270) (271) (272) (273) (274) (275) (276) (277) (278) (279) (280) (281) (282) (283) (284) (285) (286) (287) (288) (289) (290) (291) (292) (293) (294) (295) (296) (297) (298) (299) (300) (301) (302) (303) (304) (305) (306) (307) (308) (309) (310) (311) (312) (313) (314) (315) (316) (317) (318) (319) (320) (321) (322) (323) (324) (325) (326) (327) (328) (329) (330) (331) (332) (333) (334) (335) (336) (337) (338) (339) (340) (341) (342) (343) (344) (345) (346) (347) (348) (349) (350) (351) (352) (353) (354) (355) (356) (357) (358) (359) (360) (361) (362) (363) (364) (365) (366) (367) (368) (369) (370) (371) (372) (373) (374) (375) (376) (377) (378) (379) (380) (381) (382) (383) (384) (385) (386) (387) (388) (389) (390) (391) (392) (393) (394) (395) (396) (397) (398) (399) (400) (401) (402) (403) (404) (405) (406) (407) (408) (409) (410) (411) (412) (413) (414) (415) (416) (417) (418) (419) (420) (421) (422) (423) (424) (425) (426) (427) (428) (429) (430) (431) (432) (433) (434) (435) (436) (437) (438) (439) (440) (441) (442) (443) (444) (445) (446) (447) (448) (449) (450) (451) (452) (453) (454) (455) (456) (457) (458) (459) (460) (461) (462) (463) (464) (465) (466) (467) (468) (469) (470) (471) (472) (473) (474) (475) (476) (477) (478) (479) (480) (481) (482) (483) (484) (485) (486) (487) (488) (489) (490) (491) (492) (493) (494) (495) (496) (497) (498) (499) (500) (501) (502) (503) (504) (505) (506) (507) (508) (509) (510) (511) (512) (513) (514) (515) (516) (517) (518) (519) (520) (521) (522) (523) (524) (525) (526) (527) (528) (529) (530) (531) (532) (533) (534) (535) (536) (537) (538) (539) (540) (541) (542) (543) (544) (545) (546) (547) (548) (549) (550) (551) (552) (553) (554) (555) (556) (557) (558) (559) (560) (561) (562) (563) (564) (565) (566) (567) (568) (569) (570) (571) (572) (573) (574) (575) (576) (577) (578) (579) (580) (581) (582) (583) (584) (585) (586) (587) (588) (589) (590) (591) (592) (593) (594) (595) (596) (597) (598) (599) (600) (601) (602) (603) (604) (605) (606) (607) (608) (609) (610) (611) (612) (613) (614) (615) (616) (617) (618) (619) (620) (621) (622) (623) (624) (625) (626) (627) (628) (629) (630) (631) (632) (633) (634) (635) (636) (637) (638) (639) (640) (641) (642) (643) (644) (645) (646) (647) (648) (649) (650) (651) (652) (653) (654) (655) (656) (657) (658) (659) (660) (661) (662) (663) (664) (665) (666) (667) (668) (669) (670) (671) (672) (673) (674) (675) (676) (677) (678) (679) (680) (681) (682) (683) (684) (685) (686) (687) (688) (689) (690) (691) (692) (693) (694) (695) (696) (697) (698) (699) (700) (701) (702) (703) (704) (705) (706) (707) (708) (709) (710) (711) (712) (713) (714) (715) (716) (717) (718) (719) (720) (721) (722) (723) (724) (725) (726) (727) (728) (729) (730) (731) (732) (733) (734) (735) (736) (737) (738) (739) (740) (741) (742) (743) (744) (745) (746) (747) (748) (749) (750) (751) (752) (753) (754) (755) (756) (757) (758) (759) (760) (761) (762) (763) (764) (765) (766) (767) (768) (769) (770) (771) (772) (773) (774) (775) (776) (777) (778) (779) (780) (781) (782) (783) (784) (785) (786) (787) (788) (789) (790) (791) (792) (793) (794) (795) (796) (797) (798) (799) (800) (801) (802) (803) (804) (805) (806) (807) (808) (809) (810) (811) (812) (813) (814) (815) (816) (817) (818) (819) (820) (821) (822) (823) (824) (825) (826) (827) (828) (829) (830) (831) (832) (833) (834) (835) (836) (837) (838) (839) (840) (841) (842) (843) (844) (845) (846) (847) (848) (849) (850) (851) (852) (853) (854) (855) (856) (857) (858) (859) (860) (861) (862) (863) (864) (865) (866) (867) (868) (869) (870) (871) (872) (873) (874) (875) (876) (877) (878) (879) (880) (881) (882) (883) (884) (885) (886) (887) (888) (889) (890) (891) (892) (893) (894) (895) (896) (897) (898) (899) (900) (901) (902) (903) (904) (905) (906) (907) (908) (909) (910) (911) (912) (913) (914) (915) (916) (917) (918) (919) (920) (921) (922) (923) (924) (925) (926) (927) (928) (929) (930) (931) (932) (933) (934) (935) (936) (937) (938) (939) (940) (941) (942) (943) (944) (945) (946) (947) (948) (949) (950) (951) (952) (953) (954) (955) (956) (957) (958) (959) (960) (961) (962) (963) (964) (965) (966) (967) (968) (969) (970) (971) (972) (973) (974) (975) (976) (977) (978) (979) (980) (981) (982) (983) (984) (985) (986) (987) (988) (989) (990) (991) (992) (993) (994) (995) (996) (997) (998) (999) (1000) (1001) (1002) (1003) (1004) (1005) (1006) (1007) (1008) (1009) (1010) (1011) (1012) (1013) (1014) (1015) (1016) (1017) (1018) (1019) (1020) (1021) (1022) (1023) (1024) (1025) (1026) (1027) (1028) (1029) (1030) (1031) (1032) (1033) (1034) (1035) (1036) (1037) (1038) (1039) (1040) (1041) (1042) (1043) (1044) (1045) (1046) (1047) (1048) (1049) (1050) (1051) (1052) (1053) (1054) (1055) (1056) (1057) (1058) (1059) (1060) (1061) (1062) (1063) (1064) (1065) (1066) (1067) (1068) (1069) (1070) (1071) (1072) (1073) (1074) (1075) (1076) (1077) (1078) (1079) (1080) (1081) (1082) (1083) (1084) (1085) (1086) (1087) (1088) (1089) (1090) (1091) (1092) (1093) (1094) (1095) (1096) (1097) (1098) (1099) (1100) (1101) (1102) (1103) (1104) (1105) (1106) (1107) (1108) (1109) (1110) (1111) (1112) (1113) (1114) (1115) (1116) (1117) (1118) (1119) (1120) (1121) (1122) (1123) (1124) (1125) (1126) (1127) (1128) (1129) (1130) (1131) (1132) (1133) (1134) (1135) (1136) (1137) (1138) (1139) (1140) (1141) (1142) (1143) (1144) (1145) (1146) (1147) (1148) (1149) (1150) (1151) (1152) (1153) (1154) (1155) (1156) (1157) (1158) (1159) (1160) (1161) (1162) (1163) (1164) (1165) (1166) (1167) (1168) (1169) (1170) (1171) (1172) (1173) (1174) (1175) (1176) (1177) (1178) (1179) (1180) (1181) (1182) (1183) (1184) (1185) (1186) (1187) (1188) (1189) (1190) (1191) (1192) (1193) (1194) (1195) (1196) (1197) (1198) (1199) (1200) (1201) (1202) (1203) (1204) (1205) (1206) (1207) (1208) (1209) (1210) (1211) (1212) (1213) (1214) (1215) (1216) (1217) (1218) (1219) (1220) (1221) (1222) (1223) (1224) (1225) (1226) (1227) (1228) (1229) (1230) (1231) (1232) (1233) (1234) (1235) (1236) (1237) (1238) (1239) (1240) (1241) (1242) (1243) (1244) (1245) (1246) (1247) (1248) (1249) (1250) (1251) (1252) (1253) (1254) (1255) (1256) (1257) (1258) (1259) (1260) (1261) (1262) (1263) (1264) (1265) (1266) (1267) (1268) (1269) (1270) (1271) (1272) (1273) (1274) (1275) (1276) (1277) (1278) (1279) (1280) (1281) (1282) (1283) (1284) (1285) (1286) (1287) (1288) (1289) (1290) (1291) (1292) (1293) (1294) (1295) (1296) (1297) (1298) (1299) (1300) (1301) (1302) (1303) (1304) (1305) (1306) (1307) (1308) (1309) (1310) (1311) (1312) (1313) (1314) (1315) (1316) (1317) (1318) (1319) (1320) (1321) (1322) (1323) (1324) (1325) (1326) (1327) (1328) (1329) (1330) (1331) (1332) (1333) (1334) (1335) (1336) (1337) (1338) (1339) (1340) (1341) (1342) (1343) (1344) (1345) (1346) (1347) (1348) (1349) (1350) (1351) (1352) (1353) (1354) (1355) (1356) (1357) (1358) (1359) (1360) (1361) (1362) (1363) (1364) (1365) (1366) (1367) (1368) (1369) (1370) (1371) (1372) (1373) (1374) (1375) (1376) (1377) (1378) (1379) (1380) (1381) (1382) (1383) (1384) (1385) (1386) (1387) (1388) (1389) (1390) (1391) (1392) (1393) (1394) (1395) (1396) (1397) (1398) (1399) (1400) (1401) (1402) (1403) (1404) (1405) (1406) (1407) (1408) (1409) (1410) (1411) (1412) (1413) (1414) (1415) (1416) (1417) (1418) (1419) (1420) (1421) (1422) (1423) (1424) (1425) (1426) (1427) (1428) (1429) (1430) (1431) (1432) (1433) (1434) (1435) (1436) (1437) (1438) (1439) (1440) (1441) (1442) (1443) (1444) (1445) (1446) (1447) (1448) (1449) (1450) (1451) (1452) (1453) (1454) (1455) (1456) (1457) (1458) (1459) (1460) (1461) (1462) (1463) (1464) (1465) (1466) (1467) (1468) (1469) (1470) (1471) (1472) (1473) (1474) (1475) (1476) (1477) (1478) (1479) (1480) (1481) (1482) (1483) (1484) (1485) (1486) (1487) (1488) (1489) (1490) (1491) (1492) (1493) (1494) (1495) (1496) (1497) (1498) (1499) (1500) (1501) (1502) (1503) (1504) (1505) (1506) (1507) (1508) (1509) (1510) (1511) (1512) (1513) (1514) (1515) (1516) (1517) (1518) (1519) (1520) (1521) (1522) (1523) (1524) (1525) (1526) (1527) (1528) (1529) (1530) (1531) (1532) (1533) (1534) (1535) (1536) (1537) (1538) (1539) (1540) (1541) (1542) (1543) (1544) (1545) (1546) (1547) (1548) (1549) (1550) (1551) (1552) (1553) (1554) (1555) (1556) (1557) (1558) (1559) (1560) (1561) (1562) (1563) (1564) (1565) (1566) (1567) (1568) (1569) (1570) (1571) (1572) (1573) (1574) (1575) (1576) (1577) (1578) (1579) (1580) (1581) (1582) (1583) (1584) (1585) (1586) (1587) (1588) (1589) (1590) (1591) (1592) (1593) (1594) (1595) (1596) (1597) (1598) (1599) (1600) (1601) (1602) (1603) (1604) (1605) (1606) (1607) (1608) (1609) (1610) (1611) (1612) (1613) (1614) (1615) (1616) (1617) (1618) (1619) (1620) (1621) (1622) (1623) (1624) (1625) (1626) (1627) (1628) (1629) (1630) (1631) (1632) (1633) (1634) (1635) (1636) (1637) (1638) (1639) (1640) (1641) (1642) (1643) (1644) (1645) (1646) (1647) (1648) (1649) (1650) (1651) (1652) (1653) (1654) (1655) (1656) (1657) (1658) (1659) (1660) (1661) (1662) (1663) (1664) (1665) (1666) (1667) (1668) (1669) (1670) (1671) (1672) (1673) (1674) (1675) (1676) (1677) (1678) (1679) (1680) (1681) (1682) (1683) (1684) (1685) (1686) (1687) (1688) (1689) (1690) (1691) (1692) (1693) (1694) (1695) (1696) (1697) (1698) (1699) (1700) (1701) (1702) (1703) (1704) (1705) (1706) (1707) (1708) (1709) (1710) (1711) (1712) (1713) (1714) (1715) (1716) (1717) (1718) (1719) (1720) (1721) (1722) (1723) (1724) (1725) (1726) (1727) (1728) (1729) (1730) (1731) (1732) (1733) (1734) (1735) (1736) (1737) (1738) (1739) (1740) (1741) (1742) (1743) (1744) (1745) (1746) (1747) (1748) (1749) (1750) (1751) (1752) (1753) (1754) (1755) (1756) (1757) (1758) (1759) (1760) (1761) (1762) (1763) (1764) (1765) (1766) (1767) (1768) (1769) (1770) (1771) (1772) (1773) (1774) (1775) (1776) (1777) (1778) (1779) (1780) (1781) (1782) (1783) (1784) (1785) (1786) (1787) (1788) (1789) (1790) (1791) (1792) (1793) (1794) (1795) (1796) (1797) (1798) (1799) (1800) (1801) (1802) (1803) (1804) (1805) (1806) (1807) (1808) (1809) (1810) (1811) (1812) (1813) (1814) (1815) (1816) (1817) (1818) (1819) (1820) (1821) (1822) (1823) (1824) (1825) (1826) (1827) (1828) (1829) (1830) (1831) (1832) (1833) (1834) (1835) (1836) (1837) (1838) (1839) (1840) (1841) (1842) (1843) (1844) (1845) (1846) (1847) (1848) (1849) (1850) (1851) (1852) (1853) (1854) (1855) (1856) (1857) (1858) (1859) (1860) (1861) (1862) (1863) (1864) (1865) (1866) (1867) (1868) (1869) (1870) (1871) (1872) (1873) (1874) (1875) (1876) (1877) (1878) (1879) (1880) (1881) (1882) (1883) (1884) (1885) (1886) (1887) (1888) (1889) (1890) (1891) (1892) (1893) (1894) (1895) (1896) (1897) (1898) (1899) (1900) (1901) (1902) (1903) (1904) (1905) (1906) (1907) (1908) (1909) (1910) (1911) (1912) (1913) (1914) (1915) (1916) (1917) (1918) (1919) (1920) (1921) (1922) (1923) (1924) (1925) (1926) (1927) (1928) (1929) (1930) (1931) (1932) (1933) (1934) (1935) (1936) (1937) (1938) (1939) (1940) (1941) (1942) (1943) (1944) (1945) (1946) (1947) (1948) (1949) (1950) (195

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

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Mettiam

Secretary of State

CORPORATIONS

DOCUMENT # **S45927**

(8)

TEN BEACH DRIVE, INC.

APPROVED
AND
FILED

JUN 20 1995 15

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

10 BEACH DRIVE N.E.
ST. PETERSBURG FL 33701

10 BEACH DRIVE NE
ST. PETERSBURG FL 33701
US

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

3a. Date of Last Report

04/12/1991

01/03/1995

2. Principal Place of Business

2b. Mailing Address

21

25

4. FFI Number

Applied For

59-3111214

Not Applicable

22. Suite Apt. # etc.

26. Suite Apt. # etc.

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23. City & State

27. City & State

23

28

6. Filing Jurisdiction

☐

\$5.00 May Be
Added to Fees

24. Zip

25. Zip

29. Zip

30. Country

8. The corporation has liability for intangible tax under S. 194(1)(2)
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEILEN, MICHELLE L.
25 2ND STREET NORTH
SUITE 150
ST. PETERSBURG FL 33703

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 607.1501, 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 of Registered Agent (Required)

Signature of Registered Agent (Required)

149

12. OFFICERS AND DIRECTORS

TITLE

PTS

NAME

GEILEN, MICHELLE L.

STREET ADDRESS

25 2ND ST N, SUITE 150

CITY, ST, ZIP

ST. PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 194(1)(3)(b), 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. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 447, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with any changes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/95

823-1247

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Jeffrey M. Hotel, Director

DOCUMENT # S46099

(5)

1. Authorized Person

11020, INCORPORATED

Principal Place of Business

**POST OFFICE BOX 145002
CORAL GABLES FL 33114**

Mailing Address

**POST OFFICE BOX 145002
CORAL GABLES FL 33114**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified 04/15/1991	3a. Date of Last Report 04/29/1994
4. FEI Number 65-0261189	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Finances: Trust Fund Contributions ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under 19.01, F.S. Florida Statutes. ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. # etc.	26. Suite, Apt. # etc.
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent

**HAYMES, KEITH
KEITH HAYMES & ASSOCIATES, P.A.
848 BRICKELL AVE., 12TH FLOOR
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81. Name JAY STEINMAN, ESQ.
82. Street Address (P.O. Box Number is Not Acceptable) 100 S.E. 2nd Street
83. 3500 International Place
84. City Miami FL 85. Zip 33131

11. Pursuant to the provisions of Sections 602.02(2), and 602.03(1) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office from the address of record 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 applicability of Sections 602.02(2), Florida Statutes.

SIGNATURE

[Signature]

(If the Registered Agent is a corporation, print name and address)

May 19, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. TITLE	1. NAME	1. TITLE	☐ Change ☐ Addition
2. NAME	2. NAME	2. NAME	
3. STREET ADDRESS	3. STREET ADDRESS	3. STREET ADDRESS	
4. CITY & STATE	4. CITY & STATE	4. CITY & STATE	
5. TITLE	5. NAME	5. TITLE	☐ Change ☐ Addition
6. NAME	6. NAME	6. NAME	
7. STREET ADDRESS	7. STREET ADDRESS	7. STREET ADDRESS	
8. CITY & STATE	8. CITY & STATE	8. CITY & STATE	
9. TITLE	9. NAME	9. TITLE	☐ Change ☐ Addition
10. NAME	10. NAME	10. NAME	
11. STREET ADDRESS	11. STREET ADDRESS	11. STREET ADDRESS	
12. CITY & STATE	12. CITY & STATE	12. CITY & STATE	
13. TITLE	13. NAME	13. TITLE	☐ Change ☐ Addition
14. NAME	14. NAME	14. NAME	
15. STREET ADDRESS	15. STREET ADDRESS	15. STREET ADDRESS	
16. CITY & STATE	16. CITY & STATE	16. CITY & STATE	
17. TITLE	17. NAME	17. TITLE	☐ Change ☐ Addition
18. NAME	18. NAME	18. NAME	
19. STREET ADDRESS	19. STREET ADDRESS	19. STREET ADDRESS	
20. CITY & STATE	20. CITY & STATE	20. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.01(2), Florida Statutes. I further certify that the information indicated on the 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 liquidator empowered to make the report as required by Chapter 602, Florida Statutes, and that my name appears in Block 1, or Block 13 if changed, or is attached thereto with an address.

SIGNATURE:

[Signature]

Kevin Haymes

(If the Registered Agent is a corporation, print name of signing officer or director)

5/1/95

305-379-7900

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 MAY 27 AM 10:15

DOCUMENT # **S46537** (4)

1. Corporation Name

ARGEN-FLOORS CORPORATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailng Address

P.O. BOX 172208
MIAMI FL 33017
US

P.O. BOX 172208
MIAMI FL 33017
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1991

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

State Apt # etc

State Apt # etc

22

27

City & State

City & State

23

28

24

25

29

30

4. FID Number

65-0264344

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.02,
Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILITELLO, JUAN
6571 SW 34 STREET
MIAMI FL 33155

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 607.06(1) 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 obligation of, Section 607.06(1), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

21

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. TITLE

PSTD
MILITELLO, JUAN
6571 S.W. 34TH STREET
MIAMI FL 33155

2. NAME

3. STREET ADDRESS

4. CITY, STATE, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, STATE, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, STATE, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, STATE, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, STATE, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, STATE, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, STATE, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, STATE, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, STATE, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, STATE, ZIP

SIGNATURE: *X*

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juan Militello

4/25/95 (305) 273-1950

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

APR 17 PM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S46583

(8)

1. Corporation Name

AURORA PRECISION METALS, INC.

Principal Place of Business

325 SW 60TH AVE.
OCALA FL 34474

Mailing Address

325 SW 60TH AVE.
OCALA FL 34474

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1991

3a. Date of Last Report

02/09/1994

4. FEI Number

59-3068030

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. 192 (A)?
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

30

9. Name and Address of Current Registered Agent

EGAN, THOMAS M.
44 SE 1ST AVENUE
OCALA FL 34471

10. Name and Address of New Registered Agent

81 Name

Egan, Thomas M.

82 Street Address (P.O. Box Number, if Not Applicable)

915 SE 17th Street

83

84 City

Ocala,

FL

85

34471

11. Pursuant to the provisions of Sections 607, 608, and 609, 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, Florida Statutes.

SIGNATURE

Signature of Officer or Director

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS	
NAME	P VERRANDO, MARCEL G., III 2909 SW 16TH PLACE OCALA FL 34474
NAME	CT VERRANDO, MARCEL G. 2251 SW 90TH ST. OCALA FL 34474
NAME	S VERRANDO, JOAN 2251 SW 90TH ST. OCALA FL 34476
NAME	
NAME	
NAME	
NAME	
NAME	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	Director XIX Change ☐ Addition ☐ Verrando, Marcel G., III 2909 SW 16th Place Ocala, FL 34474
NAME	Drop this name Retired from firm effec 3/94 XIX Change ☐ Addition ☐
NAME	Drop this name Retired from firm effec 3/94 XIX Change ☐ Addition ☐
NAME	
NAME	
NAME	
NAME	
NAME	

14. I, the undersigned, certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 192 (A)(2)(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 for the time being or have been empowered to execute this report as required by Chapter 192, Florida Statutes, and that my name appears in Block 12 or Block 13, as the case may be, on this filing with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Marcel G. Verrando, III, Director

1/1/95

904-237-6077

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # S47228 (9)

1. Corporation Name:

C.A. PRECISION, INC.

APPROVED
AND
FILED
50 MAY 22 11:10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:

**1004 NW 51 PL
FT. LAUDERDALE FL 33311**

Mailing Address:

**1004 NW 51 PL
FT. LAUDERDALE FL 33311**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **04/23/1991** 3a. Date of Last Report: **04/20/1994**

4. FEI Number: **65-0277910** 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 kept its records in accordance with Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business: **SAME** 2a. Mailing Address:

21. Suite Apt # etc. 26. Suite Apt # etc.

22. City & State 27. City & State

23. City & State 28. City & State

24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent

**ANTUNEZ, CELIO
101 N.E. 46TH STREET
FT. LAUDERDALE FL 33334**

10. Name and Address of New Registered Agent

81. Name: 82. Street Address (P.O. Box Number is Not Acceptable): 83. City: 84. State: **FL** 85. Zip Code:

11. Pursuant to the provisions of Sections 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

SIGNATURE: *[Signature]*

12. Any fees have been paid as required after filing this report.

12. OFFICERS AND DIRECTORS

1. NAME: **D ANTUNEZ, CELIO**
2. STREET ADDRESS: **101 NE 46TH STREET**
3. CITY, STATE, ZIP: **FT. LAUDERDALE FL**

4. NAME: **T ANTUNEZ, ANTONIA**
5. STREET ADDRESS: **101 NE 46 ST**
6. CITY, STATE, ZIP: **FT. LAUDERDALE FL**

7. NAME:
8. STREET ADDRESS:
9. CITY, STATE, ZIP:
10. NAME:
11. STREET ADDRESS:
12. CITY, STATE, ZIP:
13. NAME:
14. STREET ADDRESS:
15. CITY, STATE, ZIP:
16. NAME:
17. STREET ADDRESS:
18. CITY, STATE, ZIP:
19. NAME:
20. STREET ADDRESS:
21. CITY, STATE, ZIP:
22. NAME:
23. STREET ADDRESS:
24. CITY, STATE, ZIP:
25. NAME:
26. STREET ADDRESS:
27. CITY, STATE, ZIP:
28. NAME:
29. STREET ADDRESS:
30. CITY, STATE, ZIP:
31. NAME:
32. STREET ADDRESS:
33. CITY, STATE, ZIP:
34. NAME:
35. STREET ADDRESS:
36. CITY, STATE, ZIP:
37. NAME:
38. STREET ADDRESS:
39. CITY, STATE, ZIP:
40. NAME:
41. STREET ADDRESS:
42. CITY, STATE, ZIP:
43. NAME:
44. STREET ADDRESS:
45. CITY, STATE, ZIP:
46. NAME:
47. STREET ADDRESS:
48. CITY, STATE, ZIP:
49. NAME:
50. STREET ADDRESS:
51. CITY, STATE, ZIP:
52. NAME:
53. STREET ADDRESS:
54. CITY, STATE, ZIP:
55. NAME:
56. STREET ADDRESS:
57. CITY, STATE, ZIP:
58. NAME:
59. STREET ADDRESS:
60. CITY, STATE, ZIP:
61. NAME:
62. STREET ADDRESS:
63. CITY, STATE, ZIP:
64. NAME:
65. STREET ADDRESS:
66. CITY, STATE, ZIP:
67. NAME:
68. STREET ADDRESS:
69. CITY, STATE, ZIP:
70. NAME:
71. STREET ADDRESS:
72. CITY, STATE, ZIP:
73. NAME:
74. STREET ADDRESS:
75. CITY, STATE, ZIP:
76. NAME:
77. STREET ADDRESS:
78. CITY, STATE, ZIP:
79. NAME:
80. STREET ADDRESS:
81. CITY, STATE, ZIP:
82. NAME:
83. STREET ADDRESS:
84. CITY, STATE, ZIP:
85. NAME:
86. STREET ADDRESS:
87. CITY, STATE, ZIP:
88. NAME:
89. STREET ADDRESS:
90. CITY, STATE, ZIP:
91. NAME:
92. STREET ADDRESS:
93. CITY, STATE, ZIP:
94. NAME:
95. STREET ADDRESS:
96. CITY, STATE, ZIP:
97. NAME:
98. STREET ADDRESS:
99. CITY, STATE, ZIP:
100. NAME:
101. STREET ADDRESS:
102. CITY, STATE, ZIP:
103. NAME:
104. STREET ADDRESS:
105. CITY, STATE, ZIP:
106. NAME:
107. STREET ADDRESS:
108. CITY, STATE, ZIP:
109. NAME:
110. STREET ADDRESS:
111. CITY, STATE, ZIP:
112. NAME:
113. STREET ADDRESS:
114. CITY, STATE, ZIP:
115. NAME:
116. STREET ADDRESS:
117. CITY, STATE, ZIP:
118. NAME:
119. STREET ADDRESS:
120. CITY, STATE, ZIP:
121. NAME:
122. STREET ADDRESS:
123. CITY, STATE, ZIP:
124. NAME:
125. STREET ADDRESS:
126. CITY, STATE, ZIP:
127. NAME:
128. STREET ADDRESS:
129. CITY, STATE, ZIP:
130. NAME:
131. STREET ADDRESS:
132. CITY, STATE, ZIP:
133. NAME:
134. STREET ADDRESS:
135. CITY, STATE, ZIP:
136. NAME:
137. STREET ADDRESS:
138. CITY, STATE, ZIP:
139. NAME:
140. STREET ADDRESS:
141. CITY, STATE, ZIP:
142. NAME:
143. STREET ADDRESS:
144. CITY, STATE, ZIP:
145. NAME:
146. STREET ADDRESS:
147. CITY, STATE, ZIP:
148. NAME:
149. STREET ADDRESS:
150. CITY, STATE, ZIP:
151. NAME:
152. STREET ADDRESS:
153. CITY, STATE, ZIP:
154. NAME:
155. STREET ADDRESS:
156. CITY, STATE, ZIP:
157. NAME:
158. STREET ADDRESS:
159. CITY, STATE, ZIP:
160. NAME:
161. STREET ADDRESS:
162. CITY, STATE, ZIP:
163. NAME:
164. STREET ADDRESS:
165. CITY, STATE, ZIP:
166. NAME:
167. STREET ADDRESS:
168. CITY, STATE, ZIP:
169. NAME:
170. STREET ADDRESS:
171. CITY, STATE, ZIP:
172. NAME:
173. STREET ADDRESS:
174. CITY, STATE, ZIP:
175. NAME:
176. STREET ADDRESS:
177. CITY, STATE, ZIP:
178. NAME:
179. STREET ADDRESS:
180. CITY, STATE, ZIP:
181. NAME:
182. STREET ADDRESS:
183. CITY, STATE, ZIP:
184. NAME:
185. STREET ADDRESS:
186. CITY, STATE, ZIP:
187. NAME:
188. STREET ADDRESS:
189. CITY, STATE, ZIP:
190. NAME:
191. STREET ADDRESS:
192. CITY, STATE, ZIP:
193. NAME:
194. STREET ADDRESS:
195. CITY, STATE, ZIP:
196. NAME:
197. STREET ADDRESS:
198. CITY, STATE, ZIP:
199. NAME:
200. STREET ADDRESS:
201. CITY, STATE, ZIP:
202. NAME:
203. STREET ADDRESS:
204. CITY, STATE, ZIP:
205. NAME:
206. STREET ADDRESS:
207. CITY, STATE, ZIP:
208. NAME:
209. STREET ADDRESS:
210. CITY, STATE, ZIP:
211. NAME:
212. STREET ADDRESS:
213. CITY, STATE, ZIP:
214. NAME:
215. STREET ADDRESS:
216. CITY, STATE, ZIP:
217. NAME:
218. STREET ADDRESS:
219. CITY, STATE, ZIP:
220. NAME:
221. STREET ADDRESS:
222. CITY, STATE, ZIP:
223. NAME:
224. STREET ADDRESS:
225. CITY, STATE, ZIP:
226. NAME:
227. STREET ADDRESS:
228. CITY, STATE, ZIP:
229. NAME:
230. STREET ADDRESS:
231. CITY, STATE, ZIP:
232. NAME:
233. STREET ADDRESS:
234. CITY, STATE, ZIP:
235. NAME:
236. STREET ADDRESS:
237. CITY, STATE, ZIP:
238. NAME:
239. STREET ADDRESS:
240. CITY, STATE, ZIP:
241. NAME:
242. STREET ADDRESS:
243. CITY, STATE, ZIP:
244. NAME:
245. STREET ADDRESS:
246. CITY, STATE, ZIP:
247. NAME:
248. STREET ADDRESS:
249. CITY, STATE, ZIP:
250. NAME:
251. STREET ADDRESS:
252. CITY, STATE, ZIP:
253. NAME:
254. STREET ADDRESS:
255. CITY, STATE, ZIP:
256. NAME:
257. STREET ADDRESS:
258. CITY, STATE, ZIP:
259. NAME:
260. STREET ADDRESS:
261. CITY, STATE, ZIP:
262. NAME:
263. STREET ADDRESS:
264. CITY, STATE, ZIP:
265. NAME:
266. STREET ADDRESS:
267. CITY, STATE, ZIP:
268. NAME:
269. STREET ADDRESS:
270. CITY, STATE, ZIP:
271. NAME:
272. STREET ADDRESS:
273. CITY, STATE, ZIP:
274. NAME:
275. STREET ADDRESS:
276. CITY, STATE, ZIP:
277. NAME:
278. STREET ADDRESS:
279. CITY, STATE, ZIP:
280. NAME:
281. STREET ADDRESS:
282. CITY, STATE, ZIP:
283. NAME:
284. STREET ADDRESS:
285. CITY, STATE, ZIP:
286. NAME:
287. STREET ADDRESS:
288. CITY, STATE, ZIP:
289. NAME:
290. STREET ADDRESS:
291. CITY, STATE, ZIP:
292. NAME:
293. STREET ADDRESS:
294. CITY, STATE, ZIP:
295. NAME:
296. STREET ADDRESS:
297. CITY, STATE, ZIP:
298. NAME:
299. STREET ADDRESS:
300. CITY, STATE, ZIP:
301. NAME:
302. STREET ADDRESS:
303. CITY, STATE, ZIP:
304. NAME:
305. STREET ADDRESS:
306. CITY, STATE, ZIP:
307. NAME:
308. STREET ADDRESS:
309. CITY, STATE, ZIP:
310. NAME:
311. STREET ADDRESS:
312. CITY, STATE, ZIP:
313. NAME:
314. STREET ADDRESS:
315. CITY, STATE, ZIP:
316. NAME:
317. STREET ADDRESS:
318. CITY, STATE, ZIP:
319. NAME:
320. STREET ADDRESS:
321. CITY, STATE, ZIP:
322. NAME:
323. STREET ADDRESS:
324. CITY, STATE, ZIP:
325. NAME:
326. STREET ADDRESS:
327. CITY, STATE, ZIP:
328. NAME:
329. STREET ADDRESS:
330. CITY, STATE, ZIP:
331. NAME:
332. STREET ADDRESS:
333. CITY, STATE, ZIP:
334. NAME:
335. STREET ADDRESS:
336. CITY, STATE, ZIP:
337. NAME:
338. STREET ADDRESS:
339. CITY, STATE, ZIP:
340. NAME:
341. STREET ADDRESS:
342. CITY, STATE, ZIP:
343. NAME:
344. STREET ADDRESS:
345. CITY, STATE, ZIP:
346. NAME:
347. STREET ADDRESS:
348. CITY, STATE, ZIP:
349. NAME:
350. STREET ADDRESS:
351. CITY, STATE, ZIP:
352. NAME:
353. STREET ADDRESS:
354. CITY, STATE, ZIP:
355. NAME:
356. STREET ADDRESS:
357. CITY, STATE, ZIP:
358. NAME:
359. STREET ADDRESS:
360. CITY, STATE, ZIP:
361. NAME:
362. STREET ADDRESS:
363. CITY, STATE, ZIP:
364. NAME:
365. STREET ADDRESS:
366. CITY, STATE, ZIP:
367. NAME:
368. STREET ADDRESS:
369. CITY, STATE, ZIP:
370. NAME:
371. STREET ADDRESS:
372. CITY, STATE, ZIP:
373. NAME:
374. STREET ADDRESS:
375. CITY, STATE, ZIP:
376. NAME:
377. STREET ADDRESS:
378. CITY, STATE, ZIP:
379. NAME:
380. STREET ADDRESS:
381. CITY, STATE, ZIP:
382. NAME:
383. STREET ADDRESS:
384. CITY, STATE, ZIP:
385. NAME:
386. STREET ADDRESS:
387. CITY, STATE, ZIP:
388. NAME:
389. STREET ADDRESS:
390. CITY, STATE, ZIP:
391. NAME:
392. STREET ADDRESS:
393. CITY, STATE, ZIP:
394. NAME:
395. STREET ADDRESS:
396. CITY, STATE, ZIP:
397. NAME:
398. STREET ADDRESS:
399. CITY, STATE, ZIP:
400. NAME:
401. STREET ADDRESS:
402. CITY, STATE, ZIP:
403. NAME:
404. STREET ADDRESS:
405. CITY, STATE, ZIP:
406. NAME:
407. STREET ADDRESS:
408. CITY, STATE, ZIP:
409. NAME:
410. STREET ADDRESS:
411. CITY, STATE, ZIP:
412. NAME:
413. STREET ADDRESS:
414. CITY, STATE, ZIP:
415. NAME:
416. STREET ADDRESS:
417. CITY, STATE, ZIP:
418. NAME:
419. STREET ADDRESS:
420. CITY, STATE, ZIP:
421. NAME:
422. STREET ADDRESS:
423. CITY, STATE, ZIP:
424. NAME:
425. STREET ADDRESS:
426. CITY, STATE, ZIP:
427. NAME:
428. STREET ADDRESS:
429. CITY, STATE, ZIP:
430. NAME:
431. STREET ADDRESS:
432. CITY, STATE, ZIP:
433. NAME:
434. STREET ADDRESS:
435. CITY, STATE, ZIP:
436. NAME:
437. STREET ADDRESS:
438. CITY, STATE, ZIP:
439. NAME:
440. STREET ADDRESS:
441. CITY, STATE, ZIP:
442. NAME:
443. STREET ADDRESS:
444. CITY, STATE, ZIP:
445. NAME:
446. STREET ADDRESS:
447. CITY, STATE, ZIP:
448. NAME:
449. STREET ADDRESS:
450. CITY, STATE, ZIP:
451. NAME:
452. STREET ADDRESS:
453. CITY, STATE, ZIP:
454. NAME:
455. STREET ADDRESS:
456. CITY, STATE, ZIP:
457. NAME:
458. STREET ADDRESS:
459. CITY, STATE, ZIP:
460. NAME:
461. STREET ADDRESS:
462. CITY, STATE, ZIP:
463. NAME:
464. STREET ADDRESS:
465. CITY, STATE, ZIP:
466. NAME:
467. STREET ADDRESS:
468. CITY, STATE, ZIP:
469. NAME:
470. STREET ADDRESS:
471. CITY, STATE, ZIP:
472. NAME:
473. STREET ADDRESS:
474. CITY, STATE, ZIP:
475. NAME:
476. STREET ADDRESS:
477. CITY, STATE, ZIP:
478. NAME:
479. STREET ADDRESS:
480. CITY, STATE, ZIP:
481. NAME:
482. STREET ADDRESS:
483. CITY, STATE, ZIP:
484. NAME:
485. STREET ADDRESS:
486. CITY, STATE, ZIP:
487. NAME:
488. STREET ADDRESS:
489. CITY, STATE, ZIP:
490. NAME:
491. STREET ADDRESS:
492. CITY, STATE, ZIP:
493. NAME:
494. STREET ADDRESS:
495. CITY, STATE, ZIP:
496. NAME:
497. STREET ADDRESS:
498. CITY, STATE, ZIP:
499. NAME:
500. STREET ADDRESS:
501. CITY, STATE, ZIP:
502. NAME:
503. STREET ADDRESS:
504. CITY, STATE, ZIP:
505. NAME:
506. STREET ADDRESS:
507. CITY, STATE, ZIP:
508. NAME:
509. STREET ADDRESS:
510. CITY, STATE, ZIP:
511. NAME:
512. STREET ADDRESS:
513. CITY, STATE, ZIP:
514. NAME:
515. STREET ADDRESS:
516. CITY, STATE, ZIP:
517. NAME:
518. STREET ADDRESS:
519. CITY, STATE, ZIP:
520. NAME:
521. STREET ADDRESS:
522. CITY, STATE, ZIP:
523. NAME:
524. STREET ADDRESS:
525. CITY, STATE, ZIP:
526. NAME:
527. STREET ADDRESS:
528. CITY, STATE, ZIP:
529. NAME:
530. STREET ADDRESS:
531. CITY, STATE, ZIP:
532. NAME:
533. STREET ADDRESS:
534. CITY, STATE, ZIP:
535. NAME:
536. STREET ADDRESS:
537. CITY, STATE, ZIP:
538. NAME:
539. STREET ADDRESS:
540. CITY, STATE, ZIP:
541. NAME:
542. STREET ADDRESS:
543. CITY, STATE, ZIP:
544. NAME:
545. STREET ADDRESS:
546. CITY, STATE, ZIP:
547. NAME:
548. STREET ADDRESS:
549. CITY, STATE, ZIP:
550. NAME:
551. STREET ADDRESS:
552. CITY, STATE, ZIP:
553. NAME:
554. STREET ADDRESS:
555. CITY, STATE, ZIP:
556. NAME:
557. STREET ADDRESS:
558. CITY, STATE, ZIP:
559. NAME:
560. STREET ADDRESS:
561. CITY, STATE, ZIP:
562. NAME:
563. STREET ADDRESS:
564. CITY, STATE, ZIP:
565. NAME:
566. STREET ADDRESS:
567. CITY, STATE, ZIP:
568. NAME:
569. STREET ADDRESS:
569. CITY, STATE, ZIP:
570. NAME:
571. STREET ADDRESS:
572. CITY, STATE, ZIP:
573. NAME:
574. STREET ADDRESS:
575. CITY, STATE, ZIP:
576. NAME:
577. STREET ADDRESS:
578. CITY, STATE, ZIP:
579. NAME:
580. STREET ADDRESS:
581. CITY, STATE, ZIP:
582. NAME:
583. STREET ADDRESS:
584. CITY, STATE, ZIP:
585. NAME:
586. STREET ADDRESS:
587. CITY, STATE, ZIP:
588. NAME:
589. STREET ADDRESS:
590. CITY, STATE, ZIP:
591. NAME:
592. STREET ADDRESS:
593. CITY, STATE, ZIP:
594. NAME:
595. STREET ADDRESS:
596. CITY, STATE, ZIP:
597. NAME:
598. STREET ADDRESS:
599. CITY, STATE, ZIP:
600. NAME:
601. STREET ADDRESS:
602. CITY, STATE, ZIP:
603. NAME:
604. STREET ADDRESS:
605. CITY, STATE, ZIP:
606. NAME:
607. STREET ADDRESS:
608. CITY, STATE, ZIP:
609. NAME:
610. STREET ADDRESS:
611. CITY, STATE, ZIP:
612. NAME:
613. STREET ADDRESS:
614. CITY, STATE, ZIP:
615. NAME:
616. STREET ADDRESS:
617. CITY, STATE, ZIP:
618. NAME:
619. STREET ADDRESS:
620. CITY, STATE, ZIP:
621. NAME:
622. STREET ADDRESS:
623. CITY, STATE, ZIP:
624. NAME:
625. STREET ADDRESS:
626. CITY, STATE, ZIP:
627. NAME:
628. STREET ADDRESS:
629. CITY, STATE, ZIP:
630. NAME:
631. STREET ADDRESS:
632. CITY, STATE, ZIP:
633. NAME:
634. STREET ADDRESS:
635. CITY, STATE, ZIP:
636. NAME:
637. STREET ADDRESS:
638. CITY, STATE, ZIP:
639. NAME:
640. STREET ADDRESS:
641. CITY, STATE, ZIP:
642. NAME:
643. STREET ADDRESS:
644. CITY, STATE, ZIP:
645. NAME:
646. STREET ADDRESS:
647. CITY, STATE, ZIP:
648. NAME:
649. STREET ADDRESS:
650. CITY, STATE, ZIP:
651. NAME:
652. STREET ADDRESS:
653. CITY, STATE, ZIP:
654. NAME:
655. STREET ADDRESS:
656. CITY, STATE, ZIP:
657. NAME:
658. STREET ADDRESS:
659. CITY, STATE, ZIP:
660. NAME:
661. STREET ADDRESS:
662. CITY, STATE, ZIP:
663. NAME:
664. STREET ADDRESS:
665. CITY, STATE, ZIP:
666. NAME:
667. STREET ADDRESS:
668. CITY, STATE, ZIP:
669. NAME:
670. STREET ADDRESS:
671. CITY, STATE, ZIP:
672. NAME:
673. STREET ADDRESS:
674. CITY, STATE, ZIP:
675. NAME:
676. STREET ADDRESS:
677. CITY, STATE, ZIP:
678. NAME:
679. STREET ADDRESS:
680. CITY, STATE, ZIP:
681. NAME:
682. STREET ADDRESS:
683. CITY, STATE, ZIP:
684. NAME:
685. STREET ADDRESS:
686. CITY, STATE, ZIP:
687. NAME:
688. STREET ADDRESS:
689. CITY, STATE, ZIP:
690. NAME:
691. STREET ADDRESS:
692. CITY, STATE, ZIP:
693. NAME:
694. STREET ADDRESS:
695. CITY, STATE, ZIP:
696. NAME:
697. STREET ADDRESS:
698. CITY, STATE, ZIP:
699. NAME:
700. STREET ADDRESS:
701. CITY, STATE, ZIP:
702. NAME:
703. STREET ADDRESS:
704. CITY, STATE, ZIP:
705. NAME:
706. STREET ADDRESS:
707. CITY, STATE, ZIP:
708. NAME:
709. STREET ADDRESS:
710. CITY, STATE, ZIP:
711. NAME:
712. STREET ADDRESS:
713. CITY, STATE, ZIP:
714. NAME:
715. STREET ADDRESS:
716. CITY, STATE, ZIP:
717. NAME:
718. STREET ADDRESS:
719. CITY, STATE, ZIP:
720. NAME:
721. STREET ADDRESS:
722. CITY, STATE, ZIP:
723. NAME:
724. STREET ADDRESS:
725. CITY, STATE, ZIP:
726. NAME:
727. STREET ADDRESS:
728. CITY, STATE, ZIP:
729. NAME:
730. STREET ADDRESS:
731. CITY, STATE, ZIP:
732. NAME:
733. STREET ADDRESS:
734. CITY, STATE, ZIP:
735. NAME:
736. STREET ADDRESS:
737. CITY, STATE, ZIP:
738. NAME:
739. STREET ADDRESS:
740. CITY, STATE, ZIP:
741. NAME:
742. STREET ADDRESS:
743. CITY, STATE, ZIP:
744. NAME:
745. STREET ADDRESS:
746. CITY, STATE, ZIP:
747. NAME:
748. STREET ADDRESS:
749. CITY, STATE, ZIP:
750. NAME:
751. STREET ADDRESS:
752. CITY, STATE, ZIP:
753. NAME:
754. STREET ADDRESS:
755. CITY, STATE, ZIP:
756. NAME:
757. STREET ADDRESS:
758. CITY, STATE, ZIP:
759. NAME:
760. STREET ADDRESS:
761. CITY, STATE, ZIP:
762. NAME:
763. STREET ADDRESS:
764. CITY, STATE, ZIP:
765. NAME:
766. STREET ADDRESS:
767. CITY, STATE, ZIP:
768. NAME:
769. STREET ADDRESS:
770. CITY, STATE, ZIP:
771. NAME:
772. STREET ADDRESS:
773. CITY, STATE, ZIP:
774. NAME:
775. STREET ADDRESS:
776. CITY, STATE, ZIP:
777. NAME:
778. STREET ADDRESS:
779. CITY, STATE, ZIP:
780. NAME:
781. STREET ADDRESS:
782. CITY, STATE, ZIP:
783. NAME:
784. STREET ADDRESS:
785. CITY, STATE, ZIP:
786. NAME:
787. STREET ADDRESS:
788. CITY, STATE, ZIP:
789. NAME:
790. STREET ADDRESS:
791. CITY, STATE, ZIP:
792. NAME:
793. STREET ADDRESS:
794. CITY, STATE, ZIP:
795. NAME:
796. STREET ADDRESS:
797. CITY, STATE, ZIP:
798. NAME:
799. STREET ADDRESS:
80

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **S47315** (4)

To: Corporation Name

SURFSIDE TITLE SERVICES INC.

MAY 10 1995

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Office Location

Mailing Address

**433 SILVER BEACH AVE.
STE 103
DAYTONA BEACH FL 32118
US**

**433 SILVER BEACH AVE.
STE 103
DAYTONA BEACH FL 32118
US**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation (or Change)

04/22/1991

3a. Date of Last Report

04/27/1994

4. FEI Number

59-3062814

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has authority for information tax under 26 USC 6033(c).
Florida Statutes ☐ Yes ☒ No

2. Principal Office Location

2a. Mailing Address

21. State App # etc.

26. State App # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

25. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MEEGAN BARBARA J
433 SILVER BEACH AVE.
STE 103
DAYTONA BEACH FL 32118**

81. Name

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

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.022 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. Each 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 responsibilities of Sections 607.022 and 607.1508, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Typed Name of Registered Agent)

Signature of Registered Agent (Typed Name of Registered Agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. NAME

2. NAME

3. STREET ADDRESS

4. CITY & STATE

5. NAME

6. NAME

7. STREET ADDRESS

8. CITY & STATE

9. NAME

10. NAME

11. STREET ADDRESS

12. CITY & STATE

13. NAME

14. NAME

15. STREET ADDRESS

16. CITY & STATE

17. NAME

18. NAME

19. STREET ADDRESS

20. CITY & STATE

21. NAME

22. NAME

23. STREET ADDRESS

24. CITY & STATE

25. NAME

26. NAME

27. STREET ADDRESS

28. CITY & STATE

29. NAME

30. NAME

31. STREET ADDRESS

32. CITY & STATE

33. NAME

34. NAME

35. STREET ADDRESS

36. CITY & STATE

1. NAME

2. NAME

3. STREET ADDRESS

4. CITY & STATE

5. NAME

6. NAME

7. STREET ADDRESS

8. CITY & STATE

9. NAME

10. NAME

11. STREET ADDRESS

12. CITY & STATE

13. NAME

14. NAME

15. STREET ADDRESS

16. CITY & STATE

17. NAME

18. NAME

19. STREET ADDRESS

20. CITY & STATE

21. NAME

22. NAME

23. STREET ADDRESS

24. CITY & STATE

25. NAME

26. NAME

27. STREET ADDRESS

28. CITY & STATE

29. NAME

30. NAME

31. STREET ADDRESS

32. CITY & STATE

33. NAME

34. NAME

35. STREET ADDRESS

36. CITY & STATE

SIGNATURE:

Barbara J. Meegan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barbara J. Meegan

5/18/95

258-3232

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

RECEIVED APR 17 1996

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S47364**

(2)

1. Corporation Name

MGA/PALAIS CORPORATION

Principal Place of Business

**20725 N.E. 16TH AVENUE #4
N. MIAMI BEACH FL 33179**

Mailing Address

**20725 N.E. 16TH AVENUE #4
N. MIAMI BEACH FL 33179**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/24/1991	3a. Date of Last Report 06/21/1994
4. FEI Number 65-0266168	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 or mortgage financing under its Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**PARDON, JEFFREY J.
5963 BISCAYNE BLVD.
MIAMI FL 33137-2222**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	

11. In accordance with the provisions of Sections 605, 606, and 607, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and understand the duties of a registered agent under Florida Statutes.

SIGNATURE

Signature of Agent or Officer or Director

Signature of Agent or Officer or Director

Date

12. OFFICERS, DIRECTORS, AND OTHER OFFICERS	13. ADDITIONAL OFFICERS, DIRECTORS, AND OTHER OFFICERS
NAME D SPANIER, MEL STREET ADDRESS 20725 N.E. 16TH AVE. CITY, STATE, ZIP N. MIAMI BCH. FL	NAME ☐ Change ☐ Add
NAME D WILLIAMS, GORDON STREET ADDRESS 20725 N.E. 16TH AVE. CITY, STATE, ZIP N. MIAMI BCH. FL	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add
NAME ☐	NAME ☐ Change ☐ Add

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Sections 619 (2)(f) and 619 (2)(g) Florida Statutes. I further certify that this information is reflected on the 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 registered agent or mortgage empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a change of registered agent with an address.

SIGNATURE:

Sandra B. Mortimer

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/95 205-654-1304

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S48291**

(6)

1. Corporation Name

CUSTOM OFFICE PRODUCTS, INC.

APPROVED
AND
FILED

COMM. DIV. ID: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Office Address: **2144 PALM WAY
LARGO FL 34641**
Mailing Address: **2144 PALM WAY
LARGO FL 34641**

3. Date Incorporated or Qualified: **04/26/1991**
3a. Date of Last Report: **05/01/1994**

2. Principal Office of Business: **21** 2a. Mailing Address: **26**
4. FEI Number: **59-3063886** Applying For: ☐ Not Applicable

5. Certificate of Status Desired: ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**

7. This corporation has liability for corporate tax under S. 199.03? ☐ Yes ☐ No

8. Name and Address of Current Registered Agent: **ZIMMERMAN, STEVE
2144 PALM WAY
LARGO FL 34641**

10. Name and Address of New Registered Agent:
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83 City:
84 State: **FL** 85 Zip Code:

11. Pursuant to the provisions of Sections 607.05(1) 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 Sections 607.05(1) and 607.1508, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS: 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME: VTD LYNCH, MICHAEL	13.1 NAME:	☐ Change ☐ Addition
12.2 STREET ADDRESS: 14605 49TH ST N CLEARWATER FL	13.2 STREET ADDRESS:	
12.3 CITY, ST, ZIP: PSD	13.3 CITY, ST, ZIP:	☐ Change ☐ Addition
12.4 NAME: ZIMMERMAN STEVE	13.4 NAME:	
12.5 STREET ADDRESS: 14605 49TH ST N CLEARWATER FL	13.5 STREET ADDRESS:	
12.6 CITY, ST, ZIP: PSD	13.6 CITY, ST, ZIP:	☐ Change ☐ Addition
12.7 NAME:	13.7 NAME:	
12.8 STREET ADDRESS:	13.8 STREET ADDRESS:	
12.9 CITY, ST, ZIP:	13.9 CITY, ST, ZIP:	☐ Change ☐ Addition
12.10 NAME:	13.10 NAME:	
12.11 STREET ADDRESS:	13.11 STREET ADDRESS:	
12.12 CITY, ST, ZIP:	13.12 CITY, ST, ZIP:	☐ Change ☐ Addition
12.13 NAME:	13.13 NAME:	
12.14 STREET ADDRESS:	13.14 STREET ADDRESS:	
12.15 CITY, ST, ZIP:	13.15 CITY, ST, ZIP:	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntary, furnished and shown not equally for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included in this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if such officer or director had signed for the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a change of or original statement with an address.

SIGNATURE: *Steve Zimmerman* 5.16.95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR