

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S43939** (5)

1. Corporation Name

BILMAR SALES, INC.

Principal Place of Business

**5975 N.W. 97TH DRIVE
PARKLAND FL 33076
US**

Mailing Address

**5975 NW 97TH DRIVE
SUITE 11
PARKLAND FL 33076
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/09/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0255430

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

21 **5975 N.W. 97th Dr**

Suite, Apt. #, etc.

22 **Parkland**

City & State

23 **FL**

Zip

24 **33076**

Country

25 **U.S.A.**

2a. Mailing Address

26 **5975 N.W. 97th Dr**

Suite, Apt. #, etc.

27 **Parkland, FL**

City & State

28 **Parkland, FL**

Zip

29 **33076**

Country

30 **U.S.A.**

9. Name and Address of Current Registered Agent

**BILTM, MARVIN
10242 NW 47TH ST
SUITE 11
SUNRISE FL 33351**

10. Name and Address of New Registered Agent

81 Name

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

5975 N.W. 97th Dr

83 **Parkland**

84 City

FL

85 Zip Code

33076

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 registering)

DATE

04/25/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BITTIS, MARVIN
STREET ADDRESS	5975 N.W. 97TH DRIVE
CITY - ST - ZIP	PARKLAND FL
TITLE	S
NAME	BITTIS, LINDA
STREET ADDRESS	10160 REFLECTIONS BLVD., #203
CITY - ST - ZIP	SUNRISE 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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☒ Change ☐ Addition
12 NAME	Bittis, Marvin
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☒ Change ☐ Addition
22 NAME	Bittis, Linda
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE:

Linda Bittis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/95 (407) 793-2585

DATE

TELEPHONE #