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

APPROVED
AND
FILED

95 MAY -1 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S49390** **(5)**

1. Corporation Name
MEGALOPOLIS, INC.

Principal Place of Business	Mailing Address
2810 STIRLING ROAD **HOLLYWOOD FL 33021**	**2810 STIRLING ROAD** **HOLLYWOOD FL 33021**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
04/29/1991	**05/01/1994**

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

4. FEI Number **65-0257838** ☐ 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 actually or 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
KOURGIANTAKIS, STRAVOS **2810 STIRLING ROAD** **HOLLYWOOD FL 33020**	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 Section 607.1908 and 607.1908, 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE: PD NAME: KOURGIANTAKIS, STAVROS STREET ADDRESS: 2810 STIRLING ROAD CITY-ST-ZIP: HOLLYWOOD FL	☐ Change ☐ Addition
TITLE: ~~VD~~ NAME: ~~NIKOLAOS EVANGELOS~~ STREET ADDRESS: ~~2810 STIRLING ROAD~~ CITY-ST-ZIP: ~~HOLLYWOOD FL~~	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

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)(i), 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(S): Kourgiantakis (Stavros Kourgiantakis) PRES. 4/27/95 305 9236888
SIGNATURE(S) AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

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