

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -1 AM 11:24

DOCUMENT # S65445

(6)

1. Corporation Name

NIBUR HOLDINGS, INC.

Principal Place of Business

Mailing Address

3748 NW 52ND ST.
3748 N.W. 52ND STREET
BOCA RATON FL 33486-2706
US

3748 NW 52ND ST.
3748 N.W. 52ND STREET
BOCA RATON FL 33486-2706
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/11/1991

3a. Date of Last Report

04/19/1994

4. FEI Number

65-0278389

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

2a. Mailing Address

21 440 NW 67TH ST

26 440 NW 67TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 201

27 201

City & State

City & State

23 BOCA RATON, FL

28 BOCA RATON, FL

Zip

Country

Zip

Country

24 33487

25 USA

29 33487

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUBIN, MR. FRANK
3748 NW 52ND ST.
BOCA RATON FL 33496

81 Name

RUBIN, FRANK L

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

440 NW 67TH ST

83

201

84 City

BOCA RATON

FL

85 Zip Code

33487

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 D
NAME RUBIN, FRANK
STREET ADDRESS 3748 NW 52ND STREET
CITY-ST-ZIP BOCA RATON FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME RUBIN, FRANK L
1.3 STREET ADDRESS 440 NW 67TH ST #201
1.4 CITY-ST-ZIP BOCA RATON, FL 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 110.07(3)(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 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:

FRANK L. RUBIN

1/25/95

407-995-0666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Type or Print Name)