

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

APPROVED
AND
FILED

95 MAY -1 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S67648

(3)

1. Corporation Name

P/R VENTURES INTERNATIONAL, INC.

Principal Place of Business

465 JOHN RIMSLING BLVD.
SUITE B
SARASOTA FL 34238
US

Mailing Address

6518 CYPRESS HOLLOW DR.
SARASOTA FL 34238-5636

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/19/1991

3a. Date of Last Report

03/29/1994

2. Principal Place of Business

2a. Mailing Address

21 6518 CYPRESS HOLLOW DR

26 6518 CYPRESS HOLLOW DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 SARASOTA, FL

28 SARASOTA, FL

Zip

Country

Zip

Country

24 34238

25 SARASOTA

29 34238

30 SARASOTA

4. FEI Number

65-0277607

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSTRON, ROBERT W.
8518 CYPRESS HOLLOW DR.
SARASOTA FL 34238-5636

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 607.1508, 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 renovating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

ROSTRON, ROBERT W.

STREET ADDRESS

8518 CYPRESS HOLLOW DR.

CITY - ST - ZIP

SARASOTA FL

TITLE

D

NAME

PETIT-ROSTRON, MARGUERITE

STREET ADDRESS

8518 CYPRESS HOLLOW DR.

CITY - ST - ZIP

SARASOTA FL

TITLE

V.P. MARKETING

NAME

KIRK T. ROSTRON

STREET ADDRESS

8518 CYPRESS HOLLOW DR.

CITY - ST - ZIP

SARASOTA, FL 34238

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

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

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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:

Robert W. Rostrom

ROBERT W. ROSTROM

4/28/95 (00) 921-6465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number