

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
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 JUN 20 AM 9:55

DOCUMENT # **S83056** (9)

1. Corporation Name

LANDMARK GENERAL, INC.

Principal Place of Business

Mailing Address

**3320 SW 104 AVENUE
MIAMI FL 33165
US**

**3320 SW 104 AVENUE
MIAMI FL 33165
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

09/25/1991

05/01/1994

4. FEI Number

Applied For

65-0286304

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Excluded Corporation (Excluding
Trust Fund Corporation)

☐

**\$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

6800 S.W. 40th St.

6800 S.W. 40th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 327

Suite 327

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33155

US

33155

US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GIRULNICK, EMIL
8315 SW 24TH ST.
MIAMI FL 33155**

81 Name

Sneath, Lewis

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

6800 S.W. 40th St.

83 Suite, Apt. #, etc.

Suite 327

84 City

Miami

FL

85 Zip Code

33155

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

LEWIS SNEATH

Lewis E. Sneath

6-15-95

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE **PD**
NAME **SNEATH, LEWIS**
STREET ADDRESS **3520 SW 104 AVENUE**
CITY ST ZIP **MIAMI FL**

11 TITLE **PD**
12 NAME **Sneath, Lewis**
13 STREET ADDRESS **6800 S.W. 40th St., Suite 327**
14 CITY ST ZIP **Miami, FL 33155**

TITLE **ST**
NAME **SNEATH, CLARA**
STREET ADDRESS **3520 SW 104 AVENUE**
CITY ST ZIP **MIAMI FL**

21 TITLE **ST**
22 NAME **Sneath, Clara**
23 STREET ADDRESS **6800 S.W. 40th St.**
24 CITY ST ZIP **Miami, FL 33155**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE
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:

LEWIS SNEATH *Lewis E. Sneath*

6-15-95

(Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

DATE

(Signature) (Typed Name)