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 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S89361** **(7)**

1. Corporation Name
SAPIR ELECTRONICS WATCH, INC.

Principal Place of Business	Mailing Address
~~1600 N.E. 163RD STREET #100~~ ~~NORTH MIAMI FL 33160~~ 2120 NE 162 ST N.M.B. FL 33162	~~2100 NE 162 ST~~ ~~NORTH MIAMI BEACH FL 33162~~ ~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 2120 NE 162 ST 26 ~~2128 NE 162 Street~~	3. Date Incorporated or Qualified 10/23/1991	3a. Date of Last Report 05/01/1994
Suite, Apt. #, etc 22	Suite, Apt. #, etc N.M.B. FL 33162 27	4. FEI Number 65-0298916	☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	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
~~SHMUEL, NISSIM BEN~~ ~~2100 NE 162 STREET~~ ~~SUITE 900~~ NOTH MIAMI BEACH FL 33162	81 Name: **Nissim Ben-Shmuel** 82 Street Address (P.O. Box Number is Not Acceptable): ~~2128 N.E. 162nd Street~~ 83 2120 NE 162 ST N.M.B. 84 City FL - 33162 **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] DATE
*Signature, typed or printed name of registered agent and title if agent is an officer (NOTE: Registered Agent signature required where mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	SHMUEL, NISSIM BEN	12 NAME	**Nissim Ben-Shmuel**
STREET ADDRESS	18151 NE 31 COURT	13 STREET ADDRESS	
CITY ST ZIP	NORTH MIAMI FL	14 CITY ST ZIP	
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	200001 18132 -05/12/95--01009--008 ****200.00 ****200.00
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		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)(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: [signature] **Nissim Ben-Shmuel** 5/8/95 944.054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number

0178435 CP