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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:14

DOCUMENT # **V01536** **(4)**

1. Corporation Name
REMELAR, INC.

Principal Place of Business
2520 SOUTH MIAMI ROAD
FT. LAUDERDALE FL

Mailing Address
2520 SOUTH MIAMI ROAD
FT. LAUDERDALE FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/20/1991**
3a. Date of Last Report: **03/31/1994**

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

4. FEI Number: **65-0302709** — 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
MOREAU, REGIS
2520 SOUTH MIAMI ROAD
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent
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 of Current or Proposed Registered Agent required if applicable) (NOTE: Registered Agent signature required when resigned) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MOREAU, REGIS	1.2 NAME	
STREET ADDRESS	2520 SOUTH MIAMI ROAD	1.3 STREET ADDRESS	
CITY, ST, ZIP	FT. LAUDERDALE FL	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MARANDA, ROLAND B.	2.2 NAME	
STREET ADDRESS	2520 SOUTH MIAMI ROAD	2.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL	2.4 CITY, ST, ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	BURGE, MELVIN A.	3.2 NAME	
STREET ADDRESS	2520 SOUTH MIAMI ROAD	3.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL	3.4 CITY, ST, ZIP	
TITLE	TD	4.1 TITLE	☐ Change ☐ Addition
NAME	LAHAYE, AUREL	4.2 NAME	
STREET ADDRESS	2520 SOUTH MIAMI ROAD	4.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		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 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or is set forth in attachment with an address.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — 3/15/95 Date — 305-564-3044 Daytime Phone #

0225030 CP