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 FEB 16 PM 3:30

DOCUMENT # V02116 (4)

1. Corporation Name
JAMES B. PIRTLE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
6120 WASHINGTON ST HOLLYWOOD FL 33023	6120 WASHINGTON ST HOLLYWOOD FL 33023

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/24/1991
3a. Date of Last Report: 01/19/1994

2. Principal Place of Business
21: 2230 SW 70 Ave
22 Suite, Apt. #, etc.: #1
23 City & State: Davie, FL
24 Zip: 33317
25 Country: Broward

2a. Mailing Address
26: 2230 SW 70 Ave
27 Suite, Apt. #, etc.: #1
28 City & State: Davie, FL
29 Zip: 33317
30 Country: Broward

4. FEI Number: 65-0302236 ☐ 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

PIRTLE, JAMES B.
6120 WASHINGTON ST
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 2230 SW 70 Ave #1
83: Davie
84 City: FL 85 Zip Code: 33317

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 reinstated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☑ Change ☐ Addition
NAME	PIRTLE, JAMES B.	12 NAME	James B. Pirtle	
STREET ADDRESS	6120 WASHINGTON ST	13 STREET ADDRESS	2230 S.W. 70 Ave #	
CITY-ST-ZIP	HOLLLYWOOD FL	14 CITY-ST-ZIP	Davie, FL 33317	
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	PORTELA, DARYL	22 NAME		
STREET ADDRESS	5801 SW 127 AVE	23 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	24 CITY-ST-ZIP		
TITLE	VD	31 TITLE		☐ Change ☐ Addition
NAME	PORTELA, FERNANDO	32 NAME		
STREET ADDRESS	5801 SW 127 AVE	33 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	34 CITY-ST-ZIP		
TITLE	SD	41 TITLE		☐ Change ☐ Addition
NAME	MANNETTA, SUZANNE	42 NAME		
STREET ADDRESS	7554 STIRLING RD, #206	43 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	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: Suzanne Mannetta Secretary 2/13/95 305 475-8890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Daytime Phone Number
Suzanne Mannetta

0004700 CP