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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Northern
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V10289 (9)

1. Corporation Name
I.F.R., INC.

Principal Place of Business
2137 NW 29 ST.
FT LAUDERDALE FL 33311

Mailing Address
2137 NW 29 ST.
FT LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 4861 North Dixie Hwy
Suite, Apt. #, etc.
22 Suite 201
City & State
23 Ft Lauderdale FL
Zip
24 33334
Country
25 USA

2a. Mailing Address
26 Same
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified
01/30/1992

3a. Date of Last Report
04/15/1994

4. FEI Number
65-0310982

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
LONG, DALE M
2107 NW 29TH ST.
FT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent
81 Name LONG, DALE M
82 Street Address (P.O. Box Number is Not Acceptable) 4861 N. Dixie Hwy
83 Suite 201
84 City Ft. Lauderdale FL 85 Zip Code 33334

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 _____ DATE _____
(Signature, typed or printed name of registered agent and the corporation) (Date Registered Agent signature required when terminating)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	LONG, DALE M
STREET ADDRESS	1711 BAYVIEW DRIVE
CITY - ST - ZIP	FT LAUDERDALE FL 33305
TITLE	D
NAME	LONG, CHERYL L
STREET ADDRESS	1711 BAYVIEW DRIVE
CITY - ST - ZIP	FT LAUDERDALE FL 33305
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
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 110 (7)(b)(4), Florida Statutes. I further certify that the information included 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. I am a director or officer 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, changed, or on an attachment with an address.

SIGNATURE: Dale M. Long DATE: 2-17-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Typed Name)