

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
6047 C
DIVISION OF CORPORATIONS

DOCUMENT # **V28867**

(2)

To: Corporation Name

THE NUCLEUS GROUP, INC.

Principal Place of Business

**2809 N.E. 16TH TERRACE
WILTON MANORS FL 33334**

Mailing Address

**2809 N.E. 16TH TERRACE
WILTON MANORS FL 33334**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Reclassified

04/13/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0329875

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

7. This corporation has liability for intangibles tax under s. 199.032, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**STEWART, VICTOR
2809 N.E. 16TH TERRACE
WILTON MANORS FL 33334**

10. Name and Address of New Registered Agent

81. Name

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

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1506, 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 authorized to bind and accept the obligations of Section 607.0906, Florida Statutes.

Signature of Agent

Signature of Agent (Typed or Printed Name)

Signature of Agent (Typed or Printed Name)

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	D/P STEWART, VICTOR
2. STREET ADDRESS	2809 N. E. 16TH TERR.
3. CITY & STATE	WILTON MANORS FL
4. NAME	
5. STREET ADDRESS	
6. CITY & STATE	
7. NAME	
8. STREET ADDRESS	
9. CITY & STATE	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	
14. STREET ADDRESS	
15. CITY & STATE	
16. NAME	
17. STREET ADDRESS	
18. CITY & STATE	
19. NAME	
20. STREET ADDRESS	
21. CITY & STATE	

1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY & STATE		☐ Change ☐ Addition
4. NAME		
5. STREET ADDRESS		
6. CITY & STATE		☐ Change ☐ Addition
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12. CITY & STATE		☐ Change ☐ Addition
13. NAME		
14. STREET ADDRESS		
15. CITY & STATE		☐ Change ☐ Addition
16. NAME		
17. STREET ADDRESS		
18. CITY & STATE		☐ Change ☐ Addition
19. NAME		
20. STREET ADDRESS		
21. CITY & STATE		☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(9)(b), Florida Statutes. I further certify that the information included in 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 as an addendum with an addition.

SIGNATURE:

Victor Stewart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

4-27-95

305-586-6923