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 APR 24 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V35373** **(2)**

1. Corporation Name

ANOTHER GENERATION ENTERPRISES OF PLANTATION, IN C.

Principal Place of Business	Mailing Address
2665 S BAYSHORE DR PH 2A COCONUT GROVE FL 33133	7025 NW 4TH STREET PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/08/1992	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0333121	☐ 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 intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 7025 NW 4th Street	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Plantation, FL	28 City & State
24 Zip: 33317 25 Country: USA	29 Zip 30 Country

9. Name and Address of Current Registered Agent

FINEBERG, LIBO B.
3500 GATEWAY DRIVE, STE 2-4
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 3500 Gateway Drive

83 Suite 201

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~DT~~	11 TITLE	[redacted] Delete	☒ Change ☐ Addition
NAME	~~WERNER, SETH~~	12 NAME		
STREET ADDRESS	~~150 S. PINE ISLAND ROAD SUITE 500~~	13 STREET ADDRESS		
CITY-ST-ZIP	~~PLANTATION FL 33324~~	14 CITY-ST-ZIP		
TITLE	DV	21 TITLE	D/V/T	☒ Change ☐ Addition
NAME	GOLDMAN, RICHARD	22 NAME		
STREET ADDRESS	560 NW 75TH AVE	23 STREET ADDRESS	499 NW 70th Avenue Suite 106	
CITY-ST-ZIP	PLANTATION FL	24 CITY-ST-ZIP	Plantation, FL 33317	
TITLE	DP	31 TITLE	D/P/A-S	☒ Change ☐ Addition
NAME	GOLDMAN, RENEE	32 NAME		
STREET ADDRESS	560 NW 75TH AVE	33 STREET ADDRESS	499 NW 70th Avenue Suite 106	
CITY-ST-ZIP	PLANTATION FL 33317	34 CITY-ST-ZIP	Plantation, FL 33317	
TITLE	VSD	41 TITLE		☐ Change ☐ Addition
NAME	FINEBERG, LIBO B.	42 NAME		
STREET ADDRESS	3500 GATEWAY DRIVE SUITE 201	43 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33069	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: X Renee K. Goldman President 4-7-95 (305)791-0453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

Renee K. Goldman, President

087708 CP