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 MAY -1 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V47598** **(0)**

1. Corporation Name
TANGLED TULIPS, INC.

Principal Place of Business
3225 GIFFORD LANE
MIAMI FL 33133

Mailing Address
3225 GIFFORD LANE
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/25/1992**
3a. Date of Last Report: **04/08/1994**

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

4. FEI Number: **65-0341033** — 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

JOHNSON, SANDRA J.
3225 GIFFORD LANE
MIAMI FL 33133

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 607.150(8), 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: _____ (If Registered Agent is an individual, this form must be signed by that individual. If Registered Agent is a corporation, this form must be signed by an officer or director of the registered agent.) _____ (Date)

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City, State, Zip
P	JOHNSON, SANDRA J.	3225 GIFFORD LANE	MIAMI FL
D	JOHNSON, CHRISTOPHER A.	3225 GIFFORD LANE	MIAMI FL
D	JOHNSON, SHELLY J.	3225 GIFFORD LANE	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Name	Street Address	City, State, Zip	Change / Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition

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. Further I certify that the information contained on this annual report or supplemental annual report is true and accurate and that the 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 of the report or I am attaching an addendum with an address.

SIGNATURE: Sandra J. Johnson (Sandra J. Johnson) 4/28/95 305-444-5284
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Daytime Phone #

0136303 CP