

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 20 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V47774

(7)

1. Corporation Name

DANDY WHEELS, INC.

Principal Place of Business

900 N DIXIE HWY
SUITE 210
POMPANO BCH FL 33080
US

Mailing Address

900 N DIXIE HWY
SUITE 210
POMPANO BCH FL 33080
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/26/1992	3a. Date of Last Report 08/02/1994
4. FEI Number 65-0346291	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	

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

9. Name and Address of Current Registered Agent

MREJEN, ARIE (P.A.)
1333 S. UNIVERSITY DR.
SUITE 210
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name ARIE MREJEN P. A.
82. Street Address (P.O. Box Number is Not Acceptable)
8360 W OAKLAND PARK BLVD.
83. SUITE 307
84. City SUNRISE FL 85. Zip Code 33351

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or stamped name of registered agent and title if applicable

NOTE: Registered Agent signature required when re-registering

3/13/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	KADOCH, DAVID	1.2 NAME	
STREET ADDRESS	1250 NW FLAMINGO RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☒ Change ☐ Addition
NAME	HORESH, OURI	2.2 NAME	
STREET ADDRESS	11414 LAKEVIEW DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	ZOUR, ISRAEL	3.2 NAME	
STREET ADDRESS	12700 N. BISCAYNE BLVD, #202	3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	DIERASSI, GIDEON	4.2 NAME	
STREET ADDRESS	9800 S.W. 4TH ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 110.07(3)(k), 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:

GIDEON DIERASSI DIRECTOR

4.11.95

305 786 9077