

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

APPROVED
AND
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95 MAY -1 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V59102** (6)
1. Corporation Name
FLORIDA M I V S CORP.

Principal Place of Business Mailing Address
2601 BISCAYNE BLVD **2601 BISCAYNE BLVD**
MIAMI FL 33137 **MIAMI FL 33137**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/13/1992** 3a. Date of Last Report **06/01/1994**
4. FCI Number **65-0355411** 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**
6. This corporation files annually for intangible tax under a: ☐ 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. City & State 28. City & State
24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAIRNS, TERRANCE
2601 BISCAYNE BLVD
MIAMI FL 33137

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 607.1508, 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 Sections 607.0505, Florida Statutes.

SIGNATURE

(Signature of Agent or Registered Agent and the Corporation)

(Signature of Registered Agent or Agent and the Corporation)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE **D**
2. NAME **MILLER, ROGER**
3. STREET ADDRESS **2601 BISCAYNE BLVD**
4. CITY, STATE, ZIP **MIAMI FL**
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, STATE, ZIP
9. TITLE
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99. STREET ADDRESS
100. CITY, STATE, ZIP

1. TITLE **D/P** ☒ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY, STATE, ZIP
5. TITLE **D/S** ☐ Change ☒ Addition
6. NAME **Goldstein, Michelle**
7. STREET ADDRESS **2601 Biscayne Boulevard**
8. CITY, STATE, ZIP **Miami, FL 33137**
9. TITLE ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY, STATE, ZIP
13. TITLE ☐ Change ☐ Addition
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97. TITLE ☐ Change ☐ Addition
98. NAME
99. STREET ADDRESS
100. CITY, STATE, ZIP

14. I, the undersigned, certify that the information furnished on this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.0502, 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 a made under oath. That each officer or director of this corporation or this receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attachment with an addition.

SIGNATURE:

Roger Miller
SIGNATURE AND PRINTED NAME OF BOARD OF DIRECTOR OR DIRECTOR

4/28/95 305526-6833
Date Signature