

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V71692 (0)

1. Corporation Name

PNH, INC.

Principal Place of Business

2601 BISCAYNE BLVD
MIAMI FL 33137

Mailing Address

2601 BISCAYNE BLVD
MIAMI FL 33137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/16/1992

3a. Date of Last Report

06/01/1994

4. FET Number

65-0362657

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 has liability for franchise tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

State Apt. # etc.

22

City & State

23

City & State

24

City & State

2a. Mailing Address

26

State Apt. # etc.

27

City & State

28

City & State

29

City & State

30

City & State

9. Name and Address of Current Registered Agent

SPARKMAN, KENDALL
200 S BISCAYNE BLVD
SUITE 2500
MIAMI FL 33131-2336

10. Name and Address of New Registered Agent

81 Name
CAIRNS, TERRANCE V.
82 Street Address (P.O. Box Number is Not Acceptable)
2601 Biscayne Boulevard
83
84 City
Miami FL 85 Zip Code
33137

11. Pursuant to the provisions of Sections 607.0502 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 familiar with and understand the obligations of Section 607.0502, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required when filing statement)

(Signature of Registered Agent required when filing statement)

DATE

4/27/95

12. OFFICERS AND DIRECTORS

12.1	12.2
NAME	D MILLER, ROGER
STREET ADDRESS	2601 BISCAYNE BLVD
CITY, ST, ZIP	MIAMI FL
NAME	D MILLER, JEFFREY
STREET ADDRESS	2601 BISCAYNE BLVD
CITY, ST, ZIP	MIAMI FL
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	13.2	13.3
1.1 TITLE	D/P	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE	D/V/S	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not equally for the corporation stated in the laws of the State of Florida. 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 if made under oath. That I am an officer or director of the corporation or the person or person empowered to execute this report as required by Chapter 417, Florida Statutes, and that my name appears in Block 42 or Block 43 of this report, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roger Miller

4/28/95 30556683