

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # L72491 (8)

1. Corporation Name

425 CORAL WAY INVESTMENTS, INC.

Principal Place of Business

**11811 NORTH FREEWAY, SUITE 630
HOUSTON TX 77060**

Mailing Address

**11811 NORTH FREEWAY, SUITE 630
HOUSTON TX 77060**

95 APR 18 PM 5:53

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

52-1687124

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$6.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

6. This corporation has liability for interjurisdictional tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 11811 North Freeway

2a. Mailing Address

26 11811 North Freeway

Suite, Apt. #, etc

22 Suite 300

Suite, Apt. #, etc

27 Suite 300

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**MIKES, JAMES R.
% RUDNICK & WOLFE
101 E. KENNEDY BLVD., SUITE 2000
TAMPA FL 33602**

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 607.1508, 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

(Agent or Agent-in-charge of registered agent office, if applicable)

(If the registered agent is a corporation, the president or officer)

(Date)

12. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **RUSCA, FAUSTO**
STREET ADDRESS **VIA C.B. PIODA, 14**
CITY, ST, ZIP **CH-6900 LUGANO, SWIT**

TITLE **VP**
NAME **HATFIELD, KEN**
STREET ADDRESS **11811 N. FREEWAY STE 630**
CITY, ST, ZIP **HOUSTON TX**

TITLE **ST**
NAME **TOMBARI, MICHAEL G.**
STREET ADDRESS **11811 N. FREEWAY STE 630**
CITY, ST, ZIP **HOUSTON TX**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP

5. TITLE ☒ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
**11811 North Freeway, #300
Houston, Texas 77060**

9. TITLE ☒ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
**11811 North Freeway, #300
Houston, Texas 77060**

13. TITLE ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP

17. TITLE ☐ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

21. TITLE ☐ Change ☐ Addition
22. NAME
23. STREET ADDRESS
24. 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(2)(b), 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 as an addressee with an address.

SIGNATURE: Michael G. Tombari

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/95

(713) 820-0747

Date