

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra G. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 2: 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **374317** (6)

1. Corporation Name

THE BEHRENS COMPANY, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **3706 N OCEAN BLVD
STE 11
FT LAUDERDALE FL**
Mailing Address: **3706 N OCEAN BLVD
STE 11
FT LAUDERDALE FL**

3. Date Incorporated or Qualified: **12/21/1970**
3a. Date of Last Report: **07/06/1994**

2. Principal Place of Business: **21**
2a. Mailing Address: **26**

4. FEI Number: **59-1311382**
Applied For: Not Applicable

22. Suite, Apt. #, etc.: **27**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

23. City & State: **28**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

24. City: **25** County: **29** Zip: **30**

8. This corporation has liability for intangible tax under § 190.022, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CASSEL, MARWIN S., RECEIVER
175 N.W. FIRST AVENUE, SUITE 2000
MIAMI FL 33128**

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: _____ (Signature of Registered Agent) (Type or Print Name of Registered Agent)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: **PD**
1.2 NAME: **BEHRENS, ROBERT**
1.3 STREET ADDRESS: **4010 GALT OCEAN DR #1103**
1.4 CITY, ST, ZIP: **FT LAUDERDALE FL**

Change Addition

2.1 TITLE: **VD**
2.2 NAME: **RILEY, HOWARD W., JR**
2.3 STREET ADDRESS: **524 BAY ROAD**
2.4 CITY, ST, ZIP: **VERO BEACH FL**

Change Addition

3.1 TITLE: **SD**
3.2 NAME: **BEHRENS, ELIZABETH**
3.3 STREET ADDRESS: **4010 GALT OCEAN DR #1103**
3.4 CITY, ST, ZIP: **FT LAUDERDALE FL**

Change Addition

4.1 TITLE:
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY, ST, ZIP:

Change Addition

5.1 TITLE:
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY, ST, ZIP:

Change Addition

6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY, ST, ZIP:

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 190.01(6)(b), Florida Statutes. I further certify that the information submitted 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 this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 of this filing. I am an individual with an address.

SIGNATURE: *Robert H. Behrens*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT H. BEHRENS

4/22/95 305-568-1094