

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Suzanna B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

1996 1-23-96

B-0065-C

DOCUMENT # **583875** (0)

HOLDING & MANAGEMENT, INC.



1. Name of Corporation

2. Mailing Address

821 SE FIFTH AVENUE
DELRAY BEACH FL 33483
US

P.O. BOX 780
DELRAY BCH. FL 33447-0780

3. Principal Office Address

2a. Mailing Address

21 551 S.E. 8th St.

26

State, Apt. No.

State, Apt. No.

22 Suite 503

27

City & State

City & State

23 Delray Beach FL

28

Zip

Zip

24 33483 USA

29

Country

30

9. Name and Address of Current Registered Agent

THERIEN, JOHN
739 E OCEAN AVE
BOYNTON BEACH FL 33435

3. Date Incorporated or Qualified 08/31/1978	3a. Date of Last Report 02/07/1995
4. FEI Number 59-1857357	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation is eligible for intangible tax under s. 190.032, Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

81. Name	
82. Street Address (P.O. Box Numbers Not Acceptable)	
83.	
84. City	
FL 85. Zip Code	

11. I, the undersigned, Secretary of State, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office to the principal office shown 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 hereby authorized to accept the appointment as such under s. 607.006, Florida Statutes.

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																																																																																																																								
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14. I, the undersigned, do hereby certify and represent that I am duly qualified, have full and lawful authority for the execution of this statement in accordance with Section 119.07(3)(b), Florida Statutes. I further certify that the action herein authorized for the annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am authorized to act on behalf of the corporation in the execution of this statement to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in the Florida Business Change File or available annual report as required.

SIGNATURE:

John Therien 1-16-96

407/278-0356

CR2E034 (12/95)