

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

APPROVED AND FILED
 450-147?

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **G90117 (4)**

1. Corporation Name
APPLIED BUILDING DEVELOPMENTS, INC.

JAN - 1 AM 10:15
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

10001 W OAKLAND PK BLVD SUITE 203 SUNRISE FL 33351 US

10001 W OAKLAND PK BLVD SUITE 203 SUNRISE FL 33351 US

2. Principal Place of Business 2a. Mailing Address

21 7601 WESTPOINTE BLVD 26 7601 WESTPOINTE BLVD

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

23 ORLANDO, FL 28 ORLANDO, FL

24 32835 25 29 32835 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
 01/25/1984 05/01/1994

4. FEI Number Applied For
 59-2492063 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

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City ORLANDO, FL 85 Zip Code 32835

BAUMAN, JEROME A. ESQ
 7820 PETERS RD. STE E-103
 PLANTATION FL 33324

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 807.05(1) and 807.15(8), 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 807.05(5), Florida Statutes.

SIGNATURE: *[Signature]* 1-31-95

12. OFFICERS AND DIRECTORS

11.1 TITLE	P
11.2 NAME	SCHIFF, AKIVA
11.3 STREET ADDRESS	7820 PETERS RD. E-103
11.4 CITY, ST, ZIP	PLANTATION FL
11.5 TITLE	D
11.6 NAME	KARNEY, DAVID V.
11.7 STREET ADDRESS	7820 PETERS RD. E-103
11.8 CITY, ST, ZIP	PLANTATION FL
11.9 TITLE	V
11.10 NAME	GUERON, DAN V.
11.11 STREET ADDRESS	7820 PETERS RD. E-103
11.12 CITY, ST, ZIP	PLANTATION FL
11.13 TITLE	ST
11.14 NAME	KOHN, DAVID
11.15 STREET ADDRESS	7820 PETERS RD. E-103
11.16 CITY, ST, ZIP	PLANTATION FL
11.17 TITLE	
11.18 NAME	
11.19 STREET ADDRESS	
11.20 CITY, ST, ZIP	
11.21 TITLE	
11.22 NAME	
11.23 STREET ADDRESS	
11.24 CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS	7601 WESTPOINTE BLVD	
13.4 CITY, ST, ZIP	ORLANDO, FL 32835	
13.5 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS	7601 WESTPOINTE BLVD	
13.8 CITY, ST, ZIP	ORLANDO, FL 32835	
13.9 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS	7601 WESTPOINTE BLVD	
13.12 CITY, ST, ZIP	ORLANDO, FL 32835	
13.13 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY, ST, ZIP		
13.17 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 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 Sections 110.07(2)(b), Florida Statutes. I further certify that the information indicated on this report and on any 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 (I changed or am making adjustment with an address).

SIGNATURE: *[Signature]* 1-31-95

SIGNATURE AND TITLE OF CURRENT AND NAME OF SIGNING OFFICER OR DIRECTOR Date: Date of Filing