

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

**APPROVED  
AND  
FILED**

95 MAY -1 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **J92039** (3)  
1. Corporation Name  
**ANB OF BOCA NO. 5, INC.**

Principal Place of Business Mailing Address  
**C/O NORMAN C. BELFER  
120 SUNSET AVE., 3C  
PALM BCH. FL 33480  
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 Zip Country 29 Zip Country 30 Zip Country

3. Date incorporated or Qualified **09/14/1987** 3a. Date of Last Report **04/27/1994**  
4. FEI Number **11-2878256** 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  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes.  Yes  No

9. Name and Address of Current Registered Agent  
**BELFER, NORMAN C.  
120 SUNSET AVENUE  
#3C  
PALM BEACH FL 33480**

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 607.02(4) 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature of Registered Agent) \_\_\_\_\_ (Signature of Registered Agent)  
DATE: \_\_\_\_\_ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1/2	
1. TITLE <b>P</b>	<b>BELFER, NORMAN C. 120 SUNSET AVE PALM BEACH FL</b>	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2. TITLE <b>VS</b>	<b>BELFER, ROBERT 767 FIFTH AVE., 46TH FLOOR NEW YORK NY</b>	2.1 TITLE <b>V/S Estate of Arthur Belfer (Robert Belfer, Executor)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3. TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7. TITLE		7.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
8. TITLE		8.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemptions stated in Sections 119.02(4)(a) Florida Statutes. I further certify that the information included on this application 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 partner or trustee organization to which this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. I am an attorney with an address \_\_\_\_\_

SIGNATURE:  **Norman C. Belfer** (407)832-4036  
SIGNING OFFICER OR DIRECTOR