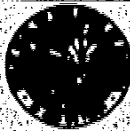


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 19 AM 8:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N33461

(7)

1. Corporation Name

THE BERNARD ROTHFELD CHILDREN'S FOUNDATION, INC.

Principal Place of Business

Mailing Address

**C/O RUTH ROTHFELD
5529 CONSTANT SPRING TERRACE
LAUDERHILL FL 33319**

**C/O RUTH ROTHFELD
5529 CONSTANT SPRING TERRACE
LAUDERHILL FL 33319**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1989

3a. Date of Last Report

03/22/1994

4. FEI Number

65-0143398

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$0.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ **\$68.75 Supplemental
Fee Not Required**

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROTHFELD, RUTH
5529 CONSTANT SPRING TERRACE
LAUDERHILL FL 33319**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restate)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROTHFELD, RUTH
5529-CONSTANT SPG. TERR.
LAUDERHILL FL**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
**DIRECTOR
RUTH ROTHFELD
5529 CONSTANT SPRING TERRACE
LAUDERHILL FLORIDA 33319** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
ROTHFELD, ERIC A.
111 WEST 40TH STREET, 22ND FLOOR
NEW YORK NY**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
**DIRECTOR
ROTHFELD, ERIC
111 W 40 STREET, 22 FLOOR
NEW YORK NY 10018** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GOLDMAN, HAZEL
6882 SW 89 TERRACE
MIAMI FL**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
**DIRECTOR
GOLDMAN, HAZEL
6882 SW 89 TERRACE
MIAMI, FLORIDA 33156** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 110.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/95

2128694300