

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 MAY -1 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P92000012742 (2)**

1. Corporation Name  
**AMB OF BOCA NO. 11, INC.**

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

Mailing Address: **C/O NORMAN C BELFER  
120 SUNSET AVE., SUITE 3C  
PALM BCH. FL 33480  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (or Rechartered): **12/17/1992** 3a. Date of Last Report: **04/27/1994**

4. FEI Number: **58-2036480** Applicant Fee: **Not Applicable**

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

3. State: **22** 3a. State: **27**

4. City: **23** 4a. City: **28**

5. Zip: **24** 5a. Zip: **29** 5b. Country: **30**

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

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

6. This corporation is liable for intangible tax under Section 199.07, Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent**

**BELFER, NORMAN C.  
120 SUNSET AVE.  
SUITE 3C  
PALM BCH. 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 607.0702 and 607.0808, 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of law for 607.0808, Florida Statutes.

SIGNATURE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	<b>DPST</b>
NAME	<b>BELFER, NORMAN C</b>
STREET ADDRESS	<b>120 SUNSET AVE., SUITE 3C</b>
CITY, ST, ZIP	<b>PALM BCH. FL</b>
TITLE	<b>D</b>
NAME	<b>BELFER, ROBERT</b>
STREET ADDRESS	<b>767 5TH AVE., 46TH FLOOR</b>
CITY, ST, ZIP	<b>NEW YORK NY</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>D Estate of Arthur Belfer</b>
2.3 STREET ADDRESS	<b>(Robert Belfer, Executor)</b>
2.4 CITY, ST, ZIP	<b>767 Fifth Avenue, 46th Fl. New York, NY 10153</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 199.07(5)(b), Florida Statutes. I further certify that the information included 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 holding responsibility to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of changes on an annual report with an address.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Norman C. Belfer**

*4/25/95*

**(407)832-4036**