FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

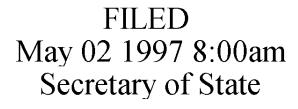
DOCUMENT # 219841

(4)

STAMFORD, INC.

Principal	Place of	Business

Mailing Address





1955 S.W. 50TH AVE. FT. LAUDERDALE FL 33317		1955 S.W. 50TH AVE. FT. LAUDERDALE FL 33317	1955 S.W. 50TH AVE. FT. LAUDERDALE FL 33317-6122					
				3. Date Incorporated or Qualified 3a. Date of Last F 02/02/1959 03/21/1996				
2. Principal P	2a. Mailing Address	5		4. FEI Number		Applied For		
21	26			F0 0070000		Not Applicable		
Suite, Apt. #, etc. Suite, Apt.		Suite, Apt. #, etc.	 D.		\$8.75 Additional			
22		27			5. Certificate of Status Desired	Fee Required		
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Countr	y	8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30		Florida Statutes			
	9. Name and Address of Cu			10. Name and Address of New Registered Agent				
SCH	WAB, MICHAEL H		81	Name				
1955 S.W. 50TH AVE.			82	Street Address (P.O. Box Number is Not Acceptable)				
FT.	LAUDERDALE FL 33317		83					
			-					
			84			┡┖╴	p Code	
office or r	regi stered agent, or both, in the S	.0502 and 607.1508, Florida Statule State of Florida Such change was a abligations of, Section 607.0505, Flor	uthorized b	y the corpora	poration submits this statement for the pa ation's board of directors. I hereby accep	rpose of changing the appointment	its registered as registered	
SIGNATURE	Signature typod or printed name of registere	od apont sort title it environtle (MOTE)	· Boulehvert An	ant siznal re reco	rired when reinstating)	DATE		
12.		AND DIRECTORS	18.	on signitist requ	ADDITIONS/CHANGES TO OFFICE		ORS IN 12	
TITLE	P	DELETE	1.4 TOLE			Chang		
NAME	MICHAEL, ISIDOR	•	1.2 NAME			4		
STREET ADDRESS	3400 S. OCEAN BLVD., #3	3F		ADDRESS				
CITY-ST-ZIP	PALM BEACH FL	-	1.8 STREET ADDRESS 1.4 CITY-ST-ZIP					
TITLE	STD	DELETE	2.1 TITLE			Chang	e Addition	
NAME	DONNER, EDWARD		2.2 NAME			22 5 1 1 1		
STREET ADORESS	3555 S. OCEAN BLVD., #1	14		ANDRECC				
CITY-ST-ZIP	PALM BEACH FL	••	2.8 STREET ADDRESS 2. 4 CITY-ST-ZIP				}	
TITLE	D	DELETE	3.1 TITLE	21.511.		Change	Addition	
NAME	MICHAEL, HENRIETTA		3.2 NAME			Change	, Comon	
STREET ADDRESS	3400 S. OCEAN BLVD., #3	}Ę		I ADDOLOG			i	
	PALM BEACH FL	<i>,</i>		ADDRESS			i	
CITY-ST-ZIP TITLE	D	DELE1E	3.4. CHY-	21-7P		☐ Change	Addition	
NAME	SCHWAB, MICHAEL	C) beech	4.2 NAME			Change		
	1955 S.W. 50TH AVE.							
STREET ADDRESS	FT. LAUDERDALE FL 3331	7		ADDRESS				
CITY-ST-ZIP TITLE	1 1. LAUDLIDALL 1 L 0001	DELETE	4.4 Criv - 5.1 Title	51-282		Change	Addition	
							, MOUSION	
NAME			5.2 NAME					
STREET ADDRESS				SZERGCA 1				
CITY-ST-ZIP		T DELETE	54 CITY-	ST - ZIP		Fin	1 1 4 3 50	
TITLE		☐ DELETE	6 1 111LE			L Change	e ∐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.8 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-:	S1 - ZIP		····		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 provided to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13