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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 282: F. D. G. LAUDERDALE, INC.

(9)

## **FILED** Apr 25 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  1000 NW 6TH ST C/O IRVING FREDERICK FT LAUDERDALE FL 33061 SOO MERRICK ROAD US ROCKVILLE CENTRE NY 11570-5402 US					. <u>.</u>	3. Date Incorporated or Qualified 3a. Date of Last Report				
						06/16/1964		/26/1996		
2. Principal Pla	ace of Business の の の の の の の の の の の の の	2a. Mailing Address 2b							oplied For of Applicable	
Sulte, Apt. 4		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional		
22 City & State	· <u>·····</u>	City & State				6. Election Campaign Financing		\$5.00	equired	
23		28				Trust Fund Contribution		Added		
Zip 24	Country 25	Zip 29	Country 30			8. This corporation has liability for i		tax under s <b>¥</b> No	. 199.032,	
<u> </u>	9. Name and Address of Curr		1301			10. Name and Address of New Re				
	GLIO, BARBARA			81	Name					
	IO NE 22ND TERRACE			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
rı.	LAUDERDALE FL 33308			B3	<del></del>					
			}	84	City			05 75m	Codo	
					•	poration submits this statement for the p	FL	11'	Code	
12.		ND DIRECTORS	13.		signature requ	red when renstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND			
TITLE	FREDERICK, IRVING	L.) DELETE	1.1 T(1		ł			☐ Change	Addition	
NAME STREET ADDRESS	695 BIRCHWOOD DR.		1.2 NA 1.3 ST		DRESS .					
CITY-ST-ZIP	WESTBURY NY			Y-ST-						
TITLE	80	DELETE		2 I TITLE .				Change	Addition	
NAME	GOGLIO, ESTHER M. 3500 GALT OCEAN DR.		2.2 NA							
STREET ADDRESS	FT. LAUDERDALE FL.		2.3 STI							
CITY-\$T-ZIP TITLE				TY-ST- Le	2117			Change	Addition	
NAME .			3.2 NA	ME		•		-		
STREET ADDRESS			3.3 \$11							
CITY-ST-ZIP TITLE		□ DELETE	3.4. C) 4.1 Til		ZIP			Change	Addition	
NAME		المال	4.1311		}			T. Augusta	HUGHION	
STREET ADDRESS					DRESS					
CITY-ST-ZIP			4 4 CI3		ZIP		<del></del> -	p-1		
			5.1 11)	LF				Change	Addition	
TITLE		Ĺ] DEL€TE		LIC						
NAME		L_] OELETE	5.2 NA		ORESS					
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NAME		☐ DELETE	5.3 \$1	REET AF Y-\$1	ſ			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			5.3 S1( 5.4 CIT	REET AF Y-ST LE	ſ			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	·		5.3 S10 5.4 CIT 6.1 TIT	REET AF Y-ST LE ME REET AC	ZIP DORESS	······································		Change	Addition	

t am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an exachment with an address.

8