

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 387325

(4)

1. Corporation Name
BDW CORP.



Principal Place of Business

% FEDCO INC., 629 71ST ST
P.O. BOX 414258
MIAMI BEACH FL 33141

Mailing Address

% FEDCO INC., 629 71ST ST
P.O. BOX 414258
MIAMI BEACH FL 33141

2. Principal Place of Business

2a. Mailing Address

21 629 71st STREET

26 629 71st STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
08/23/1971

3a. Date of Last Report
05/01/1995

4. FEI Number
59-1365488

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

10. Name and Address of New Registered Agent

RUSKIN, LLOYD
629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

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 of person or persons authorized to sign this statement

Signature of Registered Agent (Signature required when indicating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SD ☐ DELETE
NAME DAVIDSON, ISABEL
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

TITLE PD ☐ DELETE
NAME MULTACK, WILLIAM
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

TITLE ASD ☐ DELETE
NAME MULTACK, J E
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

TITLE VCD ☐ DELETE
NAME RUSKIN, L L
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

TITLE ASD ☐ DELETE
NAME RUSKIN, CANDACE
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

TITLE CTD ☐ DELETE
NAME DAVIDSON, JOSEPH H
STREET ADDRESS 629 71ST ST
CITY-STATE-ZIP MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS 629 71st STREET
14 CITY-STATE-ZIP

21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS 629 71st STREET
24 CITY-STATE-ZIP

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS 629 71st STREET
34 CITY-STATE-ZIP

41 TITLE ☒ Change ☐ Addition
42 NAME
43 STREET ADDRESS 629 71st STREET
44 CITY-STATE-ZIP

51 TITLE ☒ Change ☐ Addition
52 NAME
53 STREET ADDRESS 629 71st STREET
54 CITY-STATE-ZIP

61 TITLE ☒ Change ☐ Addition
62 NAME
63 STREET ADDRESS 629 71st STREET
64 CITY-STATE-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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lloyd Ruskin

VICE CHAIRMAN

4-8-96

(305)

865-4482

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

(Typed) Phone #

CR2E034 (12/95)