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	#	525991
Composition Name		

(6)

MEL GREBLER ASSOCIATES, INC.

Principal Place of Business 2050 N.W. 29TH ST.	Mailing Address 2050 N.W. 29TH ST.				
OAKLAND PARK FL 33311	OAKLAND PARK FL 33311				



Principal Place of Business Mailing Address 2050 N.W. 29TH ST. OAKLAND PARK FL 33311 OAKLAND PARK FL 33311									
		2050 N.W. 29TH ST. OAKLAND PARK FL 33311							
						3. Date Incorporated or Qualified 02/16/1977		of Last Re 3/15/199	
2. Principa	Place of Business	2a. Mailing Address				4. FEI Number 59-1722166			Applied For Not Applicable
21	and the second s	26				39-1722-100			Additional
	pt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		+-	Required
22 City & St	toto	City & State			6. Election Campaign Financing			0 May Be	
23	late	28			Trust Fund Contribution			d to Fees	
Zip	Country	Zip	Country				liability for intangible tax under s. 199.032,		
24	25	29	30			Florida Statutes XX/es No			
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New R	egistered	Agent	
				81	Name				
	n, allan M.			82	Street Addr	ess (P.O. Box Number is Not Acceptat	le)		
	HOLLYWOOD BLVD.			83					
SUITE	_ ,			83					
HOLL	YWOOD FL			84	City		FI	85 Zip	p Code
	ant to the provisions of Sections 607.0502 stered agent, or both, in the State of Flori r with, and accept the obligations of, Sect &E.	da. Such change was author tion 607.0505, Florida Statute	as.	corpon	allon's boa	ation submits this statement for the purid of directors. Thereby accept the app	pose of chointment as	anging its registered	agent. I am
12.		ID DIRECTORS	13.		5 Prod Care 14 14 15	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1. 1 1	TILE				Change	Addition
NAME	GREBLER, MEL		1.2 N	AMÉ					
STREET ADDRE	ISS 1881 NW 108 AVENUE		135	TREET AS	ODRESS				
CITY-ST-ZIP	PLANTATION FL			HY-\$1-	7-P			Channa	Addt an
TITLE	8	☐ DELFTE	2 1 1					Change	Addit on
NAME	GREBLER, HELAINE		2.2 N						
STREET ADDRE			1	TREET A					
CITY-ST-ZIP	PLANTATION FL	[] DELETE	3 1	HY-SI-	ZIP			Change	Addition
NAME	TD Grebler, Helaine		321					_	
STREET ADDRE	4004 1811 400 11/5		1	STREEL A	DDRESS.				
CITY-ST-ZIP	PLANTATION FL			HY-SI-	1				
101.6		DELETE	4 1	1171.F			,	☐ Change	Addition
NAME			421	IAME.					
STREET ADDR	ess		4.3 \$	STREET A	DDAESS				
CHY-ST-7IP				CITY SI	7IP			Chance	- Addition
TITLE		DELFTE		TILE				Change	Addition
NAME				SMA					
STREET ACORE	ESS			STREET A					
CITY-SI-ZIP		בין הנינונ		CITY-SI	- 7IP			Change	Addition
TITLE		DELETE	5 1	TITLE					

64 CITY - ST - ZIP mation 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 led 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 sector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 3 if changed, or on an attachment with an address. CITY-S1-ZIP 14. I do hereby certify that the incertify that the information oath; that I am an officer appears in Block 12

6.3 STREET ADDRESS

SIGNATURE

NAME

STREET ADDRESS

GREBLER

CR2E034 (12/95)