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

FILED
96 AUG 23 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 564021 (4)

1. Corporation Name
BERKHEIMER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
6047 KIMBERLY BLVD SUITE N NORTH LAUDERDALE FL 33068	6047 KIMBERLY BLVD SUITE N NORTH LAUDERDALE FL 33068

2. Principal Place of Business — 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___

2a. Mailing Address — 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

3. Date Incorporated or Qualified: 11/30/1977
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-1784480 ☐ 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
7. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

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

BERKHEIMER, JERRY D.
5851 HOLMERG RD
S2823
PARKLAND FL 33067

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 607.0502 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	STD	☐ DELETE
NAME	BERKHEIMER, EDWARD R.	
STREET ADDRESS	4601 CEDARHILL RD.	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	VD	☐ DELETE
NAME	BERKHEIMER, RANDY	
STREET ADDRESS	7201 SW 1ST ST.	
CITY-ST-ZIP	MARGATE FL	
TITLE	CEO	☐ DELETE
NAME	BERKHEIMER, JERRY D.	
STREET ADDRESS	5851 HOLMERG RD S2823	
CITY-ST-ZIP	PARKLAND FL	
TITLE	VD	☐ DELETE
NAME	KONSTEN, JOSEPH M.	
STREET ADDRESS	1061 HILLSBORO MILE	
CITY-ST-ZIP	HILLSBORO BEACH FL	
TITLE	D	☐ DELETE
NAME	BERKHEIMER, JERRY D.	
STREET ADDRESS	5851 HOLMERG RD S2823	
CITY-ST-ZIP	PARKLAND FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP ☐ Change ☐ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP ☐ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP ☐ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP ☐ Change ☐ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP ☐ Change ☐ Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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***450.00

14. I do hereby certify that the information supplied with this filing is voluntary, 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: X [signature] EDWARD R. BERKHEIMER 8-21-96 954-973-1311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)