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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #** 

569276

(9)

## FURLONG AND SONS INVESTMENTS INC.

Principal Place of Business Mailing Address

## APPROVED AND

96 JAH 22 AM 10: 38

SECRETARY OF STATE TALLAHASSEE. FLORIDA

· · · · · · · · · · · · · · · · · · ·										
746 N. 19 / HOLLYWOO	avenue DD FL 33020		746 N. 19 AVENUE HOLLYWOOD FL 33020							
							3	, Date Incorporated or Qualified	3a. Dat	te of Last Report
İ							[	04/19/1978		01/20/1995
	ace of Business	2a.	Mailing Address				4	, FEI Number	•	Applied For
21		26						59-1716297		Not Applicable
Suite, Apt. ( 22	#, etc.	27	Suite, Apt. #, etc.				5	. Certificate of Status Desired	4	\$8.75 Additional Fee Required
City & State		28	City & State				6	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζ <sub>I</sub> p	Country 25	29	Zφ	30 30	ountry		8	This corporation has liability for Florida Statutes	intangible t	tax under s. 199,032,
	g. Name and Address of Curren	tered Agent		Т		10	Name and Address of New F	Registered	Agent	
					81	Name				
FURLO	NG, GUY				82	Street Ad	ddress (F	O. Box Number is Not Acceptal	nle)	
	19 AVENUE					OHOO! FIG			,	
	WOOD FL 33020				63					
•					84	City			FL	85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 60	7.1508, Florida Statut	es, the a	pove-t	named corp	poration	submits this statement for the pu	rpose of ch	vanoino its registered office
or register fandkar wit	ed agent, or both, in the State of Florid th, and accept the obligations of, Secti	da Such 6017.	n change was authorz .0505, Florida Statute	ed by the	e corp	oration's bo	poard of d	directors. I hereby accept the app	ointment a	s registered agent. I am
SIGNATURE .	Buy 1	hull	int W	7/1 a 🦠	yen.	1			1//	16/96
	Signatino i typeo or printed name of registere i jaci	and to it	armine UNC			t signature requ	ruined when	······································	DIE	7
12.	T	D DIREC	DELETE	13				ADDITIONS/CHANGES TO OFF		
TITE	P SUBLONO ONE		L'1 pereie		1 TITLE					Change Addition
NAME CHICLL ADGRESS	FURLONG, GUY 746 N. 19 AVE.				NAME	ADORESS				
STREET ADDRESS	HOLLYWOOD FL									
CIY-SI-76	V		[] DELETE		CITY-S 1 TITLE	1-211				Change Addition
NAME.	FURLONG, GHISLAINE		<b>.</b>		NAME					
STRE-1 ADDRESS	746 N 19 AVE					ADDRESS				
CIY ST-7P	HOLLYWOOD FL 33020				CITY-S					
1-17.6			( ) DELETE		1 TITLE					Change Addition
NAMr				3 2	NAME					
STREET ADDRESS				3 3	STREE	ADDRESS				
CITY ST-7P					CITY - S	1 - ZIP				
117LF			DELETE		1 TITLE					Change
NAME					NAME					
STREET ADDRESS						ADDRESS				
CHY-S-7P			DELETE		CITY - S	T - ZIP				Change C Addition
BIFLE NUMBER			T) Dereit		1 TITLE			200	$\bigcirc\bigcirc$ 1	Change Addition
NAME STHEFT ADDRESS					NAME	ADDRESS		-01229	(/96₁-1	03070008 📆
CITY - ST- ZIP					STREET			A 分析料2	08.85	708.75
			DELETE		1 TITLE	1-ZIF			185	Change
NAME					NAME			1 %		
STREET ADDRESS						ADDRESS		•		
CITY SI-ZIP					CITY-S	1		•		
14 Lela bergia	L. cortify that the information enoplied	with this	filma in valuntarity for				h. for the	exemption stated in Section 110	07/2\/\\\ E	lorida Statutos I further

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 on 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 I changed, or of an afficient with an address.

GNATURE:

GUY FURLONG:

116/96

923-7436

SIGNATURE: