

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 573255

(7)

1. Corporation Name

THE KEISER SCHOOL, INC.

Principal Place of Business

1500 NW 49TH ST
FT LAUDERDALE FL 33309-1952
US

Mailing Address

1500 NW 49TH ST
FT LAUDERDALE FL 33309-1952
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1978

3a. Date of Last Report

04/28/1994

4. FEI Number

59-1829662

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. Does corporation have liability for unpaid taxes under 17-1181119?

Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

21

Suite Apt # etc

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite Apt # etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEISER, ARTHUR
6324 NW 79TH WAY
PARKLAND FL 33067

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 Agent in previous section of registered agent, either Florida or

Signature of Agent in previous section of registered agent, either Florida or

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PSTD
NAME	KEISER, ARTHUR
STREET ADDRESS	6324 NW 79TH WAY
CITY, ST, ZIP	PARKLAND FL
TITLE	VD
NAME	FARREN, RICHARD
STREET ADDRESS	400 W END BLVD #16D
CITY, ST, ZIP	NEW YORK NY
TITLE	C
NAME	KEISER, EVELYN C
STREET ADDRESS	1360 S. OCEAN BLVD.
CITY, ST, ZIP	POMPANO BCH, FL
TITLE	V
NAME	KEISER, BELINDA
STREET ADDRESS	6324 NW 79TH WAY
CITY, ST, ZIP	PARKLAND FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, 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 Sections 110.07(2)(b), Florida Statutes. I further certify that the information included 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:

ARTHUR KEISER

4/26/95 305/776-4456