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

PROFIT CORPORATION ANNUAL REPORT



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

1996

Principal Place of Business

DOCUMENT # 599889

(3)

THE FREDERICK FINANCIAL GROUP, INC.

Mailing Address

FILED Feb 02 1996 8:00 am Secretary of State



	4920 SARAZEN DR. HOLLYWOOD FL 33021			4920 SARAZEN DR. HOLLYWOOD FL 33021				
						3. Date Incorporated or Qualified 02/14/1979	3a. Date of Last Report 07/31/1995	
2.	Principal Place	of Business	2a. Mailing Addre	ŞS		4. FET Number	Applied	
21			26 Cuito Act 4	oto		59-1952184	Not App	
22	. 4		27			5. Certificate of Status Desired	Fee Required	
23	City & State		City & State	<sub>1</sub> '		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
	z(t)	Country Zip Cou		ntry	y 8, This corporation has lability for intangible tax ⊌nder s 199.032, Florida Statutes  Yes  No			
24		25   Name and Address of Cu	29 rrent Registered Agent	[30]		10. Name and Address of New R		
	.,	g. Hame and Address of Od	Hent Hegistered Agent		81 Nanie	io.		
	HORWIN	FREDERICK			82 Street Add	ress (P.O. Box Number is Not Acceptab	(ماد	<del> </del>
		RAZEN DR.		82 Street Ad		IGNESS (F.O. EXAMINET IS NOT PRODUCTION)		
		OOD FL 33021			83			
					84 City		85 Zip Code	
					\	ration submits this statement for the pur ard of directors. I hereby accept the app	FL   T	
SIC	MATHOE	and accept the obligations of, the arms typic of printed name of registered	agent and the it acquisitable		i Agent signature require		DATE	
12.	· · · · · · · · · · · · · · · · · · ·		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		12 Addition
TII!		PSD	[] DELE				□ Change □ A	auroun
NAM	1	HORWIN, FREDERICK 4920 SARAZEN DR		12 N	AME TREET ADDRESS			
	ET ADDRESS	HOLLYWOOD FL			HY-ST-ZIP			
THE	- ST- ZIP	HOLLTHOOD IL	DELE				☐ Change ☐ A	Addition
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SIE	FE LACORESS			535	STREET ADDRESS			
CH	f S1-20P				DITY-ST-ZIP			
TIL			□ DET	FTF 61	TITLE		Change A	Addition
NA					AME			
SIF	EET ADDRESS			635	STREET ADDRESS			
C 1	r S1-7-P			640	CITY-ST-ZIP	for the exemption stated in Section 119	ORIGINAL Florida Chat das 14	uthe:

1. 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 argual 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 this conformation or the receiver or tustee 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 attactyment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

undat 1/29/96

407.750.7200

Daytime Phone