

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY 1 AM 8:05

DOCUMENT # 623701 (0)

1. Corporation Name
ELM HOLDING CORPORATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**% MARJORIE WEBER
1111 LINCOLN RD., SUITE 510
MIAMI BEACH FL 33139
US**

Mailing Address
**6644 WINDSOR LANE
MIAMI BEACH FL 33141
US**

3. Date Incorporated or Qualified
06/01/1979

3a. Date of Last Report
03/08/1994

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

4. FEI Number
04-2022003

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**

6. This corporation has liability for intangible tax under s. 193.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**WEBER, MARJORIE J.
6644 WINDSOR LANE
MIAMI BEACH FL 33141**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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

Marjorie Weber

NOTE: Registered Agent signature required when registering

5/22/95

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROSEN, RUTH
STREET ADDRESS	20355 NE 34TH CT.
CITY - ST - ZIP	N MIAMI BCH., FL
TITLE	SD
NAME	WEBER, MARJORIE
STREET ADDRESS	6644 WINDSOR LN
CITY - ST - ZIP	MIAMI BCH. FL
TITLE	VD
NAME	BADGER, ELLEN
STREET ADDRESS	210 NAHANTON ST.
CITY - ST - ZIP	NEWTON MA
TITLE	TD
NAME	EGBERT, LINDA
STREET ADDRESS	433 GUARD HILL RD
CITY - ST - ZIP	BEDFORD NY
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 Section 119.07(3)(b), 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:

Marjorie Weber

5/22/95 305-932996