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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	TES	DIVISION OF	CORPORATIONS	ŀ		
 Corporation 		53	(3)				
SCHA	AFFER AND MARKS, INC.						
Principal Place	of Business	Mail	ling Address				
4956 SHER	HDAN ST		4956 SHERIDAN ST				
PO BOX 70	025 DOD FL 33021		PO BOX 7025				
HOLLIUMO	000 FL 33021		HOLLYUWOOD FL 33	U21	3. Date Incorporated or Qualified 04/11/1980	3a. Date of Last I 02/27/	
. Principal Pla I	ace of Business	}	Mailing Address		4. FEI Number		Applied For
Suite, Apt. (#, etc.	26	Suite, Apt. #, etc.		59-1988596	69.7	Not Applicable
		27			5. Certificate of Status Desired		5 Additional Required
City & State		28	City & State		Election Campaign Financing Trust Fund Contribution		O May Be ed to Fees
Zip	Country	$\overline{}$?ip	Country	8. This corporation has liability for i		199.032,
	9. Name and Address of Curre	29 ent Registe	red Agent	30	Florida Statutes Yes 10. Name and Address of New R		
				81 Name	10.	ogistored Agent	
	FER, ALLAN B			82 Street Ad	Idress (P.O. Box Number is Not Acceptab	le)	
	SHERIDAN STREET						
HULLI	WOOD FL 33021			83			
				84 City		FL 85 Z	ip Code
I. Pursuantt	o the provisions of Sections 607.050	12 and 607	1500 Florida Challes				
or registere	cu agent, or both, in the state of the	mua. Sugn t	mange was aumorize	s, the above-named corp ed by the corporation's bo	poration submits this statement for the purp pard of directors. I hereby accept the appo	pose of changing its ointment as registere	registered offic d agent. I am
familiar wit	th, and accept the obligations of, Sec	ction 607.05	mange was aumorize 505, Florida Statutes.	o by the corporation's bo	pard of directors. I hereby accept the appo	pose of changing its pintment as registere	registered offic d agent. I am
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oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

914-963-664 Daytme Phone