

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Office Number
Secretary of State
Tallahassee, Florida 32399-0400

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS
95 MAY -1 AM 11:47

DOCUMENT # **743711** (4)
BURGUNDY Q ASSOCIATION, INC.

1. Principal Place of Business: **PRIME MANAGEMENT GROUP INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487**

2a. Mailing Address: **PRIME MANAGEMENT GROUP INC 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487**

2. Principal Place of Business: **21** State Apt # etc: **22** City & State: **23** Zip: **24** Country: **25**

2a. Mailing Address: **26** State Apt # etc: **27** City & State: **28** Zip: **29** Country: **30**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/25/1978** 3a. Date of Last Report: **03/24/1994**

4. FCI Number: **59-1877792** 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487**

10. Name and Address of New Registered Agent
B1 Name: _____
B2 Street Address: (P.O. Box Number is Not Acceptable): _____
B3 _____
B4 City: _____ FL B5 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: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE: P	NAME: SEILER, ISIDORE STREET ADDRESS: BURGUNDY Q 789 CITY, ST, ZIP: DELRAY BEACH FL	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME: _____
TITLE: V	NAME: KEZSBUM, BESSIE STREET ADDRESS: BURGUNDY Q 803 CITY, ST, ZIP: DELRAY BEACH FL	2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME: _____
TITLE: S/D	NAME: BEYWEISS, NATHAN STREET ADDRESS: KINGS PT. BURGUNDY Q 812 CITY, ST, ZIP: DELRAY BEACH FL	3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME: _____
TITLE: T	NAME: BELOFF, FRAN STREET ADDRESS: BURGUNDY Q 780 CITY, ST, ZIP: DELRAY BEACH FL	4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME: _____
TITLE: D	NAME: STOLLER, LOTTIE STREET ADDRESS: BURGUNDY Q 770 CITY, ST, ZIP: DELRAY BEACH FL	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME: _____
TITLE: D	NAME: KIRSCHNER, SYLVIA STREET ADDRESS: BURGUNDY Q 788 CITY, ST, ZIP: DELRAY BEACH FL	6.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME: Beitaknah, Mohris 6.3 STREET ADDRESS: 399 Burgundy Q 6.4 CITY, ST, ZIP: Delray Beach, FL 33487

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Isidore Seiler* **ISIDORE SEILER** 3-8-95 288-9387
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Issued