FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

Secretary or State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

SIGNATURE: (

745348

(3)

C.G. RECREATION FOUITY, INC.

U.G. REC	SHEATION EQUITY INC.				
Principal Place of	Business	Mailing Address		I 198fil 188ft Binat Giana tebit Grane a	all digit digit digit digit digit digit digit
4850 NW 22 CT. LAUDERHILL FL 33313		4850 NW 22 CT. Lauderhill Fl 33313			
				3. Date incorporated or Qualified 12/19/1978	3a. Date of Last Report 03/02/1995
2. Principal Place	e of Business	2a. Mailing Address	ml	4. FEI Number 59-1879033	Applied For Not Applicable
Suite, Apt. #, etc.			-	Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Cry & State				6. Election Campaign Financing	\$5.00 May Be
23 Canderfull 28				Trust Fund Contribution	Added to Fees
			Country	This corporation has liability for in Florida Statutes	Yes No
24 111	9. Name and Address of Current		<u> </u>	10. Name and Address of New Re	gistered Agent
	5. Hullio 2110 1150		81 Name	Phillip IR	iedmAN
COHEN, S	SEYMOR		82 Street Add	ress (P.O. Box Numbel is Not Acceptable	15 (upt 618)
4051 NW 21ST ST			83	4/31 10.00	LIM CONT. ONLY
LAUDERH	IILL FL 33313				85 ZiprCqdq
			84 City (((uderhell	FL 「 つうつしつ
11. Pursuantto	the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the above-named corpo	pration submits this statement for the purp and of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am
or registere familiar with	a agent, or both, in the State of Florid , and accept the edigations of, Secti	la. Such change was authorized on 617.0503, Florida Statutes.	-y		3 dedol
SIGNATURE	Second //reduit	na /	PRILIP Registereo Agent signature requi	TICIDDIMINA PLOD.	Y/////
s	Signature, types or printed name of registered agent OFFICERS ANI	and and appropria	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
TITLE	P OFFICERS AN	DELETE	1.1 TITLE	DRESIDENT	Change
NAME	COHEN, SEYMOUR		1.2 NAME	Dhilip Frieds	mAN CAF 618
STREET ADDRESS	4851 NW 21ST ST.		1.3 STREET ADDRESS	4751 NW 3	151 (apl 3018
CITY-ST-ZIP	LAUDERHILL FL 33313		14 CITY-ST-ZIP	- " inqualituel	Change Addition
TITLE	D	ELETE	2.1 TITLE -V \	The PRESIDEN	
NAME	DAVIDSON, BERT	-	2.2 NAME 2.3 STREET ADDRESS	WALL BAKKELLI	r apt 100.
STREET ADDRESS	2060 NW 48TH TERRACE		2 4 CITY-ST-ZIP	than terbill	F1033313
CITY-ST-ZIP TITLE	LAUDERHILL FL	DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME	BARR, IRMA		3.2 NAME		
STREET ADDRESS	4851 N.W. 21ST ST.		3 3 STREET ADDRESS		
CITY - ST - ZIP	LAUDERHILL FL 33313		3.4. CHTY-ST-ZIP		Change Addition
TITLE	D	□ DELÉTE	4.1 TITLE		
NAME	SEEGMAN, PHILIP		4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS	4851 N.W. 21ST ST.		4.4 CITY - ST - ZIP	1000 B 86	2
CITY - ST - ZIP	LAUDERHILL FL	XDELETE	5.1 TITLE	TAUES ROllar	Change Addition
TITLE NAME	D Barrett, Nat	7	5 2 NAME	1/100	Cept 200
STREET ADDRESS	4740 NW 21ST ST.		5.3 STREET ADDRESS	yfy nw m	-133313
CITY-ST-ZIP	LAUDERHILL FL		5 4 CITY - ST - ZIP	Lauderfull 1.	Change Addition
TITLE	D	DELETE	6.1 TITLE	8000017	56858
NAME	BARBANELL, LOU		62 NAME	-03/26/9601	031031
STREET ADDRESS	4801 NW 22 CT.		6.3 STREET ADDRESS	***61.25	
CITY-ST-ZIP	LAUDERHILL, FL 00000	Leith this filing is valuntarily furnic	6.4 CITY-ST-ZIP	fy for the exemption stated in Section 119 curate and that my signature shall have th	9.07(3)(k), Florida Statutes. I further
certify that	at the information indicated on this ari	noration or the receiver or trustee	empowered to execute	ty for the exemption stated in Section 118 surate and that my signature shall have th this report as required by Chapter 617, f	e same legal effect as it made under Florida Statutes; and that my name
appears i	in Block 12 or Block 13 if changed, of	or an attachment with an accirc			954-739-34
1	~\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	X x 2 d - d	7	1-1 -41.	757 777 7947