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Apr 15 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 825212 (4)  
1. Corporation Name  
THE KISLAK COMPANY, INC.



Principal Place of Business: 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016-2897  
Mailing Address: 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016-5897

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/16/1970	04/25/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		22-1913039	Not Applicable
24 Country		29 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25		29		<input type="checkbox"/>	<input type="checkbox"/>
26		30		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
27		30		<input type="checkbox"/>	<input type="checkbox"/>
28		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BRAFMAN, HOWARD J. 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP KISLAK, JAY 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SVP STILES, LINDA M 1000 RT. 9 WOODBRIIDGE NJ 07095	<input type="checkbox"/> DELETE	1.2 NAME
STREET ADDRESS	T FLEISCHMAN, DAVID H. 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016	<input checked="" type="checkbox"/> DELETE	1.3 STREET ADDRESS
CITY - ST - ZIP	DVP GROSS, JAMES P 7900 MIAMI LAKES DR MIAMI LAKES FL 33016	<input checked="" type="checkbox"/> DELETE	1.4 CITY - ST - ZIP
CITY - ST - ZIP	DVS BRAFMAN, HOWARD J. 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP	SVP SLATTERY, HERBERT H JR 7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016	<input checked="" type="checkbox"/> DELETE	2.2 NAME
CITY - ST - ZIP			2.3 STREET ADDRESS
CITY - ST - ZIP			2.4 CITY - ST - ZIP
CITY - ST - ZIP			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP			3.2 NAME
CITY - ST - ZIP			3.3 STREET ADDRESS
CITY - ST - ZIP			3.4 CITY - ST - ZIP
CITY - ST - ZIP			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP			4.2 NAME
CITY - ST - ZIP			4.3 STREET ADDRESS
CITY - ST - ZIP			4.4 CITY - ST - ZIP
CITY - ST - ZIP			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP			5.2 NAME
CITY - ST - ZIP			5.3 STREET ADDRESS
CITY - ST - ZIP			5.4 CITY - ST - ZIP
CITY - ST - ZIP			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP			6.2 NAME
CITY - ST - ZIP			6.3 STREET ADDRESS
CITY - ST - ZIP			6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:   
HOWARD J. BRAFMAN, SENIOR VICE PRESIDENT

Date: 4/9 /97 (305) 364-4213  
Daytime Phone # \_\_\_\_\_

CR2E034 (9/96)

**EXHIBIT "A"**

**BOARD OF DIRECTORS AND OFFICERS**

**OF**

**THE KISLAK COMPANY, INC.**

<b><u>NAME</u></b>	<b><u>TITLE</u></b>	<b><u>BUSINESS ADDRESS</u></b>
JAY I. KISLAK	DIRECTOR & PRESIDENT	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
HOWARD J. BRAFMAN	DIRECTOR, VICE PRESIDENT & SECRETARY	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
LINDA M. STILES	SENIOR VICE PRESIDENT	1000 ROUTE 9 WOODBIDGE, NJ 07095
JEFFREY WIENER	SENIOR VICE PRESIDENT	1000 ROUTE 9 WOODBIDGE, NJ 07095
THOMAS BARTLEMO	VICE PRESIDENT & TREASURER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
CAROL A. FENELLO	VICE PRESIDENT & ASSISTANT SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
ROBERT HOLLAND	VICE PRESIDENT	1000 ROUTE 9 WOODBIDGE, NJ 07095
SIMA K. JELIN	VICE PRESIDENT & ASSISTANT SECRETARY	1000 ROUTE 9 WOODBIDGE, NJ 07095
ROSANNE MACCARONE	VICE PRESIDENT	1000 ROUTE 9 WOODBIDGE, NJ 07095
DOUGLAS A. ZASTROW	CONTROLLER, ASSISTANT TREASURER & ASSISTANT SECRETARY	1000 ROUTE 9 WOODBIDGE, NEW JERSEY 07095
FRANCINE B. GIRIMONTE	ASSISTANT SECRETARY	1000 ROUTE 9 WOODBIDGE, NJ 07095