FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS (1) DOCUMENT # BALABAN-GORDON CO., INC. Principal Place of Business Mailing Address 1504 THE OAKS DRIVE 1504 THE OAKS DRIVE MAITLAND FL 32751 MAITLAND FL 32751 3. Date Incorporated or Qualified 3a. Date of Last Report 03/02/1976 03/10/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 13-0463960 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Γ 23 28 Trust Fund Contribution Added to Fees Ζıρ Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 24 25 29 ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TANNENBAUM, GERALD Street Address (P.O. Box Number is Not Acceptable) 82 981 PADDINGTON TERRACE **HEATHROW FL 32746** 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Slynature, typed or printed name of registered agent and till-if applicable (NOTE: Registered Agent signature required when redistating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1 1 THILE Change Addition BALABAN, MARCIA NAMe 1.2 NAME 1504 THE OAKS AVENUE STREET ADDRESS 13 STREET ADDRESS MAITLAND FL CITY-S1-ZIP 1.4 C/TY - ST - Z/F TITLE DELETE 2.1 TITLE ☐ Change ☐ Addition BALABAN, ARTHUR P NAME 2.2 NAME 1504 THE OAKS AVENUE STREET ADDRESS 2.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 2.4 CITY - ST - ZIP TITLE DELETE 3 1 THUE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-ZIF 34 CITY ST-ZP DELETE THEF 4 1 1 TLE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y - S1 - 2)F TITLE DELFTE 5 1 TITLE Change Add tion 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CHY+ST-7P TATLE DELETE 6 1 TIFLE Change Addit on NAME 6.2 NAME STREET ADDRESS 6.3 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)(k). Florida Statutes, I further certify that the information indicated on this annual country 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 of the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

appears in Block 12 or Block

3/31/96

407-644-574V

(12/95)

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