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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # F9400003293 (7) 1. Corporation Name

FRIEDL	.and, warren & Panz	 	1 88 44 1844 1 848) 200 2 100 2 1000 1100				
Principal Place of Business 960 BROADWAY HICKSVILLE NY 11801		Mailing Address 960 BROADWAY HICKSVILLE NY 11801	960 BROADWAY					
					3. Date Incorporated or Qualified 06/23/1994	l .	Last Report 15/1995	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			11-3176721 Not Applicab			
22		27			5. Certificate of Status Desired		Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing		\$5.00 May Be	je
3		28	·		Trust Fund Contribution		Added to Fees	
Zip 24	Country [25]	Zip 29	Country 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			.
<u> </u>	9. Name and Address of Cur		1301		10. Name and Address of New R		ent	
3341 SE STUART	LL, JOHN E SLATER ST FL 34997		8 8 8	2 Street Address 3 City	ess (P.O. Box Number is Not Acceptab	FL	85 Zip Code	
or registere familiar witi SIGNATURE	ed agent, or both, in the State of F	lorida. Such chango was authorize Section 607.0505, Florida Statutes.	od by the co	e-named corpor poration's boar ant signature requires	ation submits this statement for the pur d of directors. I hereby accept the appe	pose of chang ointment as req	ing its registered gistered agent. I a	l office am
12.		AND DIRECTORS	13.	r. It signature taquire.	ADDITIONS/CHANGES TO OFF		RECTORS IN 12	
TITLE	P	DELETE	1. 1 TITL	E			Change 🔲 Add	Jition
NAME	FRIEDLAND, ALAN L		1.2 NAM	£				
STREET ADDRESS	40 ROCKLAND DR.			ET ADDRESS				
CITY-ST-ZIP TITLE	JERICHO NY 11753 VT □ DELETE		1.4 CITY - ST - ZIP 2.1 TILLE				Change 🗀 Add	dition
NAME	PANZER, HERBERT	Deterio	2. Catt			L)	Mange [] Adu	Paloti
STREET ADDRESS	6 LISA CT.			E1 ADDRESS				
CITY-ST-ZIP	PLAINVIEW NY 22803		2.4 CITY	- S1 - ZIP				1
TITLE	VS	☐ DELETE	3 1 THE	Ę			Change 🔲 Add	dition
NAME	WARREN, ANDREW E		3.2 NAM					
STREET ADDRESS	7 GEORGIA LANE CROTON-ON-HUDSON N	V 10520		ET ADDRESS				
CITY-ST-ZIP TITLE	CHOTOR-OR-HOUSON N	T 10320 ☐ DELETE	3.4 CITY 4. 1 THL		`		Change	tition
NAME		_	4.2 NAM			L		
STREET ADDRESS			4.3 STRE	E1 ADDRESS				.
CITY-ST-ZIP			4.4 CITY		1000 d Balancia de colocidos			
TITLE		☐ DELETE	5. 1 TITL				Change 🔲 Add	dition
NAME			5.2 NAM					
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CHY 6. 1 Till	-ST-ZIP			Change Add	dition
NAME		<u></u>	6.2 NAM		•		· •	
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIP			6.4 D/TY					
certify that	the information indicated on this a Lam an officer or director of the co	annual report or supplemental annu	ual report is : e eninowere	rue and accura	or the exemption stated in Section 119, te and that my signature shall have the s report as required by Chapter 607, Fi	same legal effi orida Statutes;	ect as if made un	nder
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DESCRIPTION OF SIGNING OFFICER OR DESCRIPTION OR DESCRIPTION OF SIGNING OFFICER OR DESCRIPTION OR DESCRIPTION OR								

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR