

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G55643** (2)

1. Corporation Name
A & G BLATON OF FLORIDA, INC.



Principal Place of Business Mailing Address
109 SEMINOLE DRIVE SUITE 101 ARCHDALE NC 27263 US

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip Country
24
25
2a. Mailing Address
26 **109 SEMINOLE DRIVE**
27 State, Apt. #, etc.
28 **ARCHDALE, N.C.**
29 Zip Country
30 **27263**

3. Date Incorporated or Qualified **08/01/1983** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-2309365** Applied For Not Applicable
5. Certificate of Status Derived **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**HANSON, THOMAS A
222 LAKEVIEW AVE., #1400
201 S. BISCAYNE BLVD
WEST PALM BEACH FL 33401**

81 Name
82 Street Address (P.O. Box Numbers Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of Directors. Thereby, I accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS
TITLE DELETE
NAME **PD BLATON, ARMAND**
STREET ADDRESS **12900 S.W. 248TH STREET MIAMI FL**
CITY-STATE-ZIP
TITLE DELETE
NAME **D BLATON, GERALD**
STREET ADDRESS **12900 S.W. 248TH STREET MIAMI FL**
CITY-STATE-ZIP
TITLE DELETE
NAME **STD VERBELEN, WILLY**
STREET ADDRESS **5210 NANTUCKET ROAD GRENSBORO NC**
CITY-STATE-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-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(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement thereto 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, the name of business organization to be used on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked, or is an alternate agent with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VERBELEN Willy

3/19/96

Pro-280-3769

CR2E034 (12/95)