FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G61532

(9)

BALABAN-GORDON COMPANY OF FLORIDA, INC.

FILED Apr 23 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address					
P O BOX 1007 N/A 1504 THE OAKS DRIVE MAITLAND FL 32751		P O BOX 1007	1504 THE OAKS DRIVE		DO NOT WRITE IN THIS SPACE		
US		U\$			3. Date Incorporated or Qualified 09/28/1983		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23		2a. Mailing Address 26			4. FEI Number Applied 59-2318328 Not App		
		Suite, Apt. #, etc.			5. Certificate of Status Desired See Require		
		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country Z ₁ p 25 29		Coun 30			ole	
	9. Name and Address of Curre	nt Registered Agent		<u> </u>	10. Name and Address of New Registered Agent		
	NNENBAUM, GERALD		*	1 Name			
981 PÁDDINGTON TERRACE Heathrow Fl 32746			Ē	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
				3			
				4 City	FL 85 Zip Code		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change w	vas authorized	by the corporal	poration submits this statement for the purpose of changing its reg tion's board of directors. I hereby accept the appointment as regis	istered dered	
SIGNATURE	Signature, typed or printed name of registered ag		AIOIE Bosistand	loont signature requi	ired when reinstating) DATE		
12.		ID DIRECTORS	13.	dinit signatore redor	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE	PO	☐ DELETE				Addition	
NAME	Ba laban, arthur P		1.2 NAM	E			
STREET ADDRESS	1504 THE OAKS DRIVE		1.3 STR	ET ADDRESS			
CITY-ST-ZIP	MAITLAND, FL 00000			-ST-ZIP			
TITLE	VO	☐ DELETE	2.1 TiTL	E	L Change	Addition	
NAME	TANNENBAUM, GERALD		2.2 NAA	-	,		
STREET ADDRESS	981 PADDINGTON TERRACE HEATHROW FL	•		ET ADDRESS	,		
CITY-ST-ZIP	HEATHROW PL	☐ DELETE		r-ST-ZIP	Change	Addition	
TITLE			3.1 TITL 3.2 NAM			- squaron	
NAME Street adoress				EET ADDRESS			
CITY-ST-ZIP			1	7-ST-ZIP			
TITLE		DELETE			Change	Addition	
NAME			4.2 NA	AE			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP				-S1-ZIP			
TITLE		☐ DELETE	5.1 THE	E	Change	Addition	
NAME			5.2 NAM	IE			
STREET ADDRESS			5.3 STR	ET ADDRESS			
CITY-ST-ZIP		- I per este		'-ST-ZIP	F10 F3	Addition	
TITLE		☐ DELETÉ			Change	Addition	
NAME	·		6.2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY ST-7IP	1		6.4 CIT	'- ST-7IP			

14. Thereby 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 supplimental 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 trusted 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 a fattachmost with an address.