

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G87041**

(1)

1. Corporation Name

ED-RENE, INC.



Principal Place of Business

Mailing Address

**5500 N.W. 15TH STREET
MARGATE FL 33063
US**

**C/O EDWARD PERLMAN
2846 N.W. 55 AVE.
LAUDERHILL FL 33313
US**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/27/1983

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2381635

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$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

**PERLMAN, EDWARD
2846 N.W. 55TH AVE.
LAUDERHILL FL 33313**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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. 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 if not applicable)

(Date) Signature typed or printed (name of registered agent and if not applicable)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DP
PERLMAN, EDWARD
2846 N.W. 55TH AVE.
LAUDERHILL FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11.1 TITLE

12. NAME

13. STREET ADDRESS

14. CITY - ST - ZIP

21.1 TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

31.1 TITLE

32. NAME

33. STREET ADDRESS

34. CITY - ST - ZIP

41.1 TITLE

42. NAME

43. STREET ADDRESS

44. CITY - ST - ZIP

51.1 TITLE

52. NAME

53. STREET ADDRESS

54. CITY - ST - ZIP

61.1 TITLE

62. NAME

63. STREET ADDRESS

64. CITY - ST - ZIP

**200001860232
-06/12/96--01103--033
***225.00**

☐ Change ☐ Addition

☐ Change ☐ Addition

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

F-14-96

Date

954-484-2468

Display as Phone #

CR2E034 (12/95)