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 # **H87962** **(7)**

1. Corporation Name

HOWARD DORFMAN DISPLAYS, INC.

Principal Place of Business

% HENRYETTA DORFMAN
5076 N.W. 66TH LANE
CORAL SPRINGS FL 33067

Mailing Address

% HENRYETTA DORFMAN
5076 N.W. 66TH LANE
CORAL SPRINGS FL 33067

2. Principal Place of Business
21
Street Apt. #, etc.
22
City, & State
23
Zip 24 County 25

2a. Mailing Address
26
Street Apt. #, etc.
27
City, & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: **12/03/1985**

3a. Date of Last Report: **01/19/1995**

4. FEI Number: **59-2623592** ☐ 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

9. Name and Address of Current Registered Agent

DORFMAN, HENRYETTA
5076 N.W. 66TH LANE
CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent

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 607.1905, 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

Date

12. OFFICERS AND DIRECTORS

Title	DV	☐ DELETE
Name	DORFMAN, HOWARD	
Street Address	5076 N.W. 66TH LANE	
City-St-Zip	CORAL SPRINGS FL	
Title	DP	☐ DELETE
Name	DORFMAN, HENRYETTA	
Street Address	5076 N.W. 66TH LANE	
City-St-Zip	CORAL SPRINGS FL	
Title		☐ DELETE
Name		
Street Address		
City-St-Zip		
Title		☐ DELETE
Name		
Street Address		
City-St-Zip		
Title		☐ DELETE
Name		
Street Address		
City-St-Zip		
Title		☐ DELETE
Name		
Street Address		
City-St-Zip		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change	☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	☐ Change	☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	☐ Change	☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	☐ Change	☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	☐ Change	☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	☐ Change	☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I declare, certify, that the information supplied with this form is voluntarily furnished and 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 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 added, above with an address.

SIGNATURE: Henryetta Dorfman HENRYETTA DORFMAN 1-16-96 305-344-8458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #