

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 AM 10:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H91585

(0)

1. Corporation Name

V.F. 24 HOLDINGS, INC.

Principal Place of Business

**2900 MILITARY TR., #201 S.
BOCA RATON FL 33431**

Mailing Address

**2900 MILITARY TR., #201 S.
BOCA RATON FL 33431**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/26/1985

3a. Date of Last Report

02/23/1994

4. FEI Number

59-2638487

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DECKELBAUM, GORDON
2900 MILITARY TR., #201 S.
BOCA RATON FL 33431**

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 title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DT
GATTINGER, FRANKLIN J.
8600 DECARIE BLVD, SUITE 200
TOWN OF MOUNT ROYAL QC**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
T/V/D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PDS
POMERANTZ, SAUL
8785 LANGEIJER BLVD.
TOWN OF MOUNT ROYAL QC**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
☒ Change ☐ Addition
**8600 Decarie Blvd, Suite 200
Town of Mount Royal, QC H4P 2N2**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**AS
RICHTER, MORRIS
2900 N MILITARY TR 201-S
BOCA RATON FL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
☒ Change ☐ Addition
RESIGNED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
☐ Change ☒ Addition
**V/Asst't Secretary/D
Pomerantz, Terry
8600 Decarie Blvd, Suite 200
Town of Mount Royal, QC H4P 2N2**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP
☐ 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 110.07(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: Franklin J. Gattinger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12, 1995

Date

(514) 341-8600

Telephone Number