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 # **J12683** **(5)**

1. Corporation Name

A.S.K. OF BOCA RATON, INC.

Principal Place of Business	Mailing Address
2033 STAYSAIL LANE JUPITER FL 33477	2033 STAYSAIL LANE JUPITER FL 33477

3. Date Incorporated or Qualified: **05/02/1986**
3a. Date of Last Report: **04/26/1995**
4. FEI Number: **59-2663910** ☐ 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 or intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 County	29 Zip / 30 County

9. Name and Address of Current Registered Agent

HOLFELDER, ALFRED A
2033 STAYSAIL LANE
JUPITER FL 33477

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 607.1622, Florida Statutes, the foreign profit 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: Alfred A. Holfelder - President DATE: 1-23-96

12. OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELETE
NAME	HOLFELDER, ALFRED A.	
STREET ADDRESS	2033 STAYSAIL LANE	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	☐ DELETE
NAME	HOLFELDER, JACKLYN H.	
STREET ADDRESS	2033 STAYSAIL LANE	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	☒ DELETE
NAME	EBERHARDT, DOROTHY	
STREET ADDRESS	7444 MANDARIN DR.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	☒ DELETE
NAME	DELUCA, SAM	
STREET ADDRESS	35 BEECHTREE LANE	
CITY-ST-ZIP	PELHAN MANOR NY	
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		
11 TITLE	S	☐ Change ☒ Addition
12 NAME	LAWRENCE HOLFELDER	
13 STREET ADDRESS	11730 LIPSEY ROAD	
14 CITY-ST-ZIP	TAMPA FL 33618	
21 TITLE	T	☐ Change ☒ Addition
22 NAME	GEOFF HIGGS	
23 STREET ADDRESS	246 FOREST HILL BLVD.	
24 CITY-ST-ZIP	WEST PALM BEACH FL 33405	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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.

SIGNATURE: X Alfred A. Holfelder - President 1-23-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date