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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

K19891 **DOCUMENT #**

(6)

HOLLANDALE EQUITY CAPITAL CORPORATION

Principal Place of Business

Mailing Address



256 OCEAN WAY VERO BEACH FL 32963				256 OCEAN WAY VERO BEACH FL 32963								
								3. Date incorporated 03/29/1988			of Last F 05/01/1	
2. Principal Plan	ce of Business	2a. Mailir	a. Mailing Address				4. FEI Number				Applied For	
21				6				59-00449	59			Not Applicable
Suite, Apt. #, etc. 27				Suite, Apt. #, etc.			5. Certificate of Status	s Desired	\$8.75 Additional Fee Required			
City & State			City &	3 State				6. Election Campaign	Financing		\$5.0	0 May Be
23			28					Trust Fund Contrib				ed to Fees
Zip Country			Zip	—ı — — — — — — — — — — — — — — — — — —				8. This corporation has liability for intangible tax under s 199.032,				
24		30			Florida Statutes							
	9. Name and A	ddress of Curren	t Registered	Agent				10. Name and Addre	ss of New I	Registered	Agent	
						81	Name					
WALLA			82	Street Add	t Address (P.O. Box Number is Not Acceptable)							
256 00	CEAN WAY					L						
VERO	BEACH FL 3296	33				83						
						84	City			FL	85 Z	ip Code
familiar witi	h, and accept the	in the State of Floric obligations of, Sectional agent	ion 607.0505,	Florida Statutes				and of directors. Thereby ac		DATE		
12.		OFFICERS ANI	D DIRECTORS	3	13.			ADDITIONS/CHAN	IGES TO OF			
TITLE	PD			DELETE	1.1	HTLE					Change	Add-tion
NAME	WALLACH,	KURT			121	IAME						
STREET ADDRESS	256 OCEA	YAW P			138	TAEET	ADDRESS					
CITY-ST-ZIP	VERO BEA	CH FL			140	(1) V - S	ST-ZIP					
TITLE	ST			DELETE	2.1	mt€					Change	☐ Addition
NAME	WALLACH,	Marilyn G.			22 N	IAME						
STREET ADDRESS	256 OCEA				235	TREE	LADDRESS					
CITY - ST-ZIP	VERO BEA	CH FL			240	HY-	ST - ZIP					
TITLE				DELETE	3 1	TITLE					☐ Change	Addition
NAME					321	IAME						
STREET ADDRESS					3 3	STREE	T ADDRESS					
CITY - ST - ZIP			_ 124.00 ++				ST-ZIP				Cheese	Addition
TITLE				☐ DELETE		TITLE					☐ Change	e
NAME						MAME						
STREET ADDRESS							f ADDRESS					
CITY - ST - ZIP				C) DELCH			ST-ZIP				Change	Addition
TITLE				DELETE		TITLE	i					, L Manier
NAME						NAME						
STREET ADDRESS							T ADDRESS					
CITY-ST-ZIF				C SDETE			S1-ZIP		·		Change	Add:tion
TITLE				DELETE	8	TITLE	1					7,00,000
NAME						NAME						
STREET ADDRESS					. I		T ADDRESS					
CITY - ST - ZIP	l			···			ST - ZIP	y for the eventor stated i	- Castian 11	0.07/0/// 5	lovido Cto	tutor I futbor

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 atlachment with an address

SIGNATURE: Marly & Wallack
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 407-567-8500