

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 23 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K41608 (6)

1. Corporation Name

THE POST EDGE, INC.

Principal Place of Business

2040 SHERMAN ST
HOLLYWOOD FL 33020-2127

Mailing Address

2040 SHERMAN ST
HOLLYWOOD FL 33020-2127

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/01/1988

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

22 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0079286

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

10. Name and Address of New Registered Agent

MURDOCH, ROBERT E.
790 E. BROWARD BLVD.
SUITE 400
FT. LAUDERDALE FL 33301

81 Name

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

83

84 City

MANDELL, LEE
75 VALENCIA AVE
SUITE 1002
CORAL GABLES FL 33134

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 fee if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	ORSBURN, MICHAEL L.	2040 SHERMAN ST HOLLYWOOD FL	
D	ORSBURN, CHRISTINE N	2040 SHERMAN ST HOLLYWOOD FL	
VP	REA, STEVEN C.	2040 SHERMAN ST HOLLYWOOD FL	
VP	DUCAN, MICHAEL A.	2040 SHERMAN ST. HOLLYWOOD FL	
VP	LORBER, KENNETH D.	2040 SHERMAN ST. HOLLYWOOD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
				☐	☐
2.1 TITLE <td>2.2 NAME<td>2.3 STREET ADDRESS<td>2.4 CITY - ST - ZIP<td>Change</td><td>Addition</td></td></td></td>	2.2 NAME <td>2.3 STREET ADDRESS<td>2.4 CITY - ST - ZIP<td>Change</td><td>Addition</td></td></td>	2.3 STREET ADDRESS <td>2.4 CITY - ST - ZIP<td>Change</td><td>Addition</td></td>	2.4 CITY - ST - ZIP <td>Change</td> <td>Addition</td>	Change	Addition
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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 holder of a power of attorney empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on non-filing with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN C. REA

3/16/95

305 920 0800