

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 # K82639 (1)

1. Corporation Name

INDU-CHE SALES, INC.

Principal Place of Business

Mailing Address

101 BRINY AVENUE  
SUITE 1808  
POMPANO BEACH, FL. 33062

101 BRINY AVENUE  
SUITE 1808  
POMPANO BEACH, FL. 33062

2. Date Incorporated or Qualified  
04/24/89

3a. Date of Last Report  
02/14/95

2. Principal Place of Business

2a. Mailing Address

21 175 REGATTA DRIVE  
Suite, Apt. #, etc.

25 P.O. BOX 2350  
Suite, Apt. #, etc.

4. FCI Number  
65-0124978

Applied For  
Not Applicable

22 City & State  
JUPITER, FLORIDA

27 City & State  
JUPITER, FLORIDA

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. 193.032, Florida Statutes ☒ Yes ☐ No

24 33477  
Zip

25 Country

29 33468  
Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAIZEL, ISAAC E.  
101 BRINY AVENUE  
SUITE 1808  
POMPANO BEACH, FLORIDA 33062

81 Name

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

83

84 City

JUPITER

FL

85 Zip Code  
33477

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 filing for change)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME MAIZEL, ISAAC E.  
STREET ADDRESS 101 BRINY AVENUE, SUITE 1808  
CITY-ST-ZIP POMPANO BEACH, FL. 33062

11 TITLE DP  
12 NAME MAIZEL, ISAAC E.  
13 STREET ADDRESS 175 REGATTA DRIVE  
14 CITY-ST-ZIP JUPITER, FL. 33477

TITLE S  
NAME MAIZEL, ELZA  
STREET ADDRESS 101 BRINY AVENUE, SUITE 1808  
CITY-ST-ZIP JUPITER, FL. 33062

21 TITLE S  
22 NAME MAIZEL, ELZA  
23 STREET ADDRESS 175 REGATTA DRIVE  
24 CITY-ST-ZIP JUPITER, FL. 33477

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

800001768838  
-04/04/96-01013-014  
\*\*\*200.00

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 113.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ISAAC E. MAIZEL, Presi. 3/29/96

407-744-9847

4-3-96

CR2E034 (12/95)