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

CORPORATION ANNUAL REPORT



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

1996

L77350

(1)

**DOCUMENT #** 1. Corporation Name

## THE LINDENTHAL CORPORATION

THE EMPERITURE COM CONTROL							
Principal Place of Business Mailing Address							1 TODINDII DII TODIS TIIDI DIII DEI DEI DEI DIDI DIDI DIDI D
2908 GRAND BLVD. HOLIDAY FL 34690			2908 GRAND BLVD. HOLIDAY FL 34690 US				
US			08				3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995
2, 8	Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number Applied For
21 Critic Ant # etc			Suite, Apt. #, etc.				59-3011738 Not Applicable \$8.75 Additional
Suite, Apt. #, etc.			27				5. Certificate of Status Desired Fee Required
23	City & State		City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
	Country		Zip	Country			8. This corporation has liability for intangible tax under s 199.032,
24		25	Decistered Agent	30	r		Fiorida Statutes Yes No  10. Name and Address of New Registered Agent
		9. Name and Address of Current	Redistered Adeur		81	Name	IO. Hallie and Address of New Hogisteriou Agent
LINDENTHAL, FRANK E.					82	Street Ad	dress (P.O. Box Number is Not Acceptable)
2908 GRAND BLVD.					83		
	HOLIDAY	/ FL 34690					In I To Out
					84		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 coept the obligations of, Section 907.0505, Florida Statutes.  SIGNATURE  Signature, typed or prin of name of registered agent and life if applicable. (NOTs: Registered Agent signature required when revisating)  DATE  OFFICERS AND DIRECTORS. IN 12							
12.		OFFICERS AND	DIRECTORS	13.	Age	n signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DP	DELETE	1.11	ITLE		Change Addition
NAM				1.2 N	AME	1	
STHE	ET ADDRESS	2908 GRAND BLVD.	1.3 STREET A		ADDRESS		
CITY	-ST-ZIP					ST-ZIP	
TITLE	E			2. 1 TITLE		1	Change Addition
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	ET ADDRESS	2908 GRAND BLVD.					
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	EET ADDRESS			335	STREE	T ADDRESS	
	-ST-7IP					ST-ZIP	
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	(- S1 - ZIP					ST-ZIP	Chance D Addison
TATL			☐ DEFELE		TITLE		Change Addition
NAM					IAME		
l	EET ADDRESS					TADDRESS	
CITY-SI-ZIP 6.4 CITY  14. I do hereby certify that the information supplied with this filing is voluntarily furnished and do						si-ZIP es not qualif	fy 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 attachment with an address. SIGNATURE: SIGNATURE AND TYPES OF PRINT FORKE LINGENTHAL 4-29-96 (813) 938-4493

E OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date