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 # **M44724** **(6)**

1. Corporation Name

FEDCO MANAGEMENT SERVICES, INC.

Principal Place of Business	Mailing Address
C/O LLOYD L. RUSKIN 629 71ST STREET MIAMI BEACH FL 33141	C/O LLOYD L. RUSKIN 629 71ST STREET MIAMI BEACH FL 33141

2. Principal Place of Business 21 621 71st Street	2a. Mailing Address 26 621 71st Street
Suite, Apt. #, etc. 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **01/13/1987**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-2750956** ☐ 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

RUSKIN, LLOYD L.
629 71ST STREET
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 621 71st Street
83
84 City **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 _____ DATE
Signature, typed or printed name of registered agent and date (if applicable) (if NEW Registered Agent signature required when applicable)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CTD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	DAVIDSON, JOSEPH H.		1.2 NAME	
STREET ADDRESS	629 71ST ST.		1.3 STREET ADDRESS	621 71st. Street
CITY-ST-ZIP	MIAMI BCH. FL		1.4 CITY-ST-ZIP	
TITLE	VCD	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	RUSKIN, LLOYD L.		2.2 NAME	
STREET ADDRESS	629 71ST ST.		2.3 STREET ADDRESS	621 71st. Street
CITY-ST-ZIP	MIAMI BCH. FL		2.4 CITY-ST-ZIP	
TITLE	PD	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	MULTACK, WILLIAM E.		3.2 NAME	
STREET ADDRESS	629 71ST ST.		3.3 STREET ADDRESS	621 71st. Street
CITY-ST-ZIP	MIAMI BCH. FL		3.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	DAVIDSON, ISABEL		4.2 NAME	
STREET ADDRESS	629 71ST ST.		4.3 STREET ADDRESS	621 71st Street
CITY-ST-ZIP	MIAMI BCH. FL		4.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	RUSKIN, CANDACE (ASST S)		5.2 NAME	
STREET ADDRESS	629 71ST ST.		5.3 STREET ADDRESS	621 71st Street
CITY-ST-ZIP	MIAMI BCH. FL		5.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	MULTACK, JOELLEN (ASSTS)		6.2 NAME	
STREET ADDRESS	629 71ST ST.		6.3 STREET ADDRESS	621 71st Street
CITY-ST-ZIP	MIAMI BCH. FL		6.4 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 exemption 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 on an attachment with an address.

SIGNATURE: _____ Vice Chairman 4-12-96 305 865-4482
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Vice Chairman