FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

Principal Place of Business

1345 W BAY DR.

LARGO FL 34640

(9)

Mailing Address

1345 W BAY DR.

LARGO FL 34640

#101

AMERICAN ROMANIAN MEDICAL RELIEF FOUNDATION, INC

						59-3043886 Not Applicable	
2. Principal Pi	ace of Business	2a. Malling Address				5. Certificate of Status Desired S8.75 Additional	
	26 Suite, Apt. #, etc. Suite, Apt. #, etc.					Fee Required	
22	27					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State	9		City & State			7. Is this nonprofit corporation a homeowners association?	
23		28				Yes V No	
Zip	Country	Zip	Cou	Country		8. This corporation owes or has paid the current year Intangible	
24	25		30			Personal Property Tax due June 30. 🗹 Yes 🗌 No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81	Name	.	
KAUFFMAN, JAY E.				82 Street Address (P.O. Box Number is Not Acceptable)			
1345 W BAY DR.			ļ				
#101			i	83			
LARGO	FL 34640		}	84	City	85 Zip Code	
						FL S 25 0000	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the corporation's heard of directors. Therefore a constitution is the state of Florida, Such change was substituted by the corporation's heard of directors. Therefore a constitution is the state of Florida, Such change was substituted by the corporation's heard of directors.							
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 617.0503, Florida Statutes.							
SIGNATURE							
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered	i Age	ni signalufe	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTS OFFICERS AND	DELETE	11 11	rı E		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	WEINSTOCK, STEPHAN M.		1.2 NA				
	1345 WEST BAY DR.				4000000		
STREET ADDRESS	LARGO FL				ADDRESS	* * * * * * * * * * * * * * * * * * *	
CITY-ST-ZIP TITLE	D D	DELETE	1.4 CIT		1 - ZIP	Change Addition	
NAME	WEINSTOCK, STEPHAN M.	L. Dettie	2.2 NA			, and the state of	
STREET ADDRESS	1345 WEST BAY DR.				ADDDCCC		
1	1.1000 5			2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP		÷e €s,	
CITY-ST-ZIP TITLE			3.1 TIT		1-ZIP	Change Addition	
NAME	BINES, SAM		3.1 M			- Change - Roundin	
STREET ADDRESS	11590 SEMINOLE BLVD A-11				ADDRESS		
CITY-ST-ZIP	LARGO FL		3.4. Cf				
TITLE	# 4100 F	DELETE	4.1 TiT		1- FIL	Change Addition	
NAME			4.2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.4 CIT				
TITLE		☐ DELETE	5.1 TIT	_	- ¢.81	☐ Change ☐ Addillon	
NAME			5.2 NA				
STREET ADDRESS					ADDRESS :		
CITY-ST-ZIP			5.4 CIT				
TITLE		☐ DELETE	6.1 TIT		- ZIF	☐ Change ☐ Addition	
NAME			6.2 NA		!	, Charge Land Head of the Control of	
CTOPET ADODECC					ADDDECC		

CITY-ST-ZIP

14. I hereby certify that the Information supplied with this filing 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 public empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. ,8135818706

FILED

Mar 16 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified

02/22/1991 4. FEI Number