FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # N93000003590

1. Corporation Name: Historic DANIA ANTIQUE DISTRICT BUSNINESS ASSC. INC.

Principal Place of Business

Mailing Address: P.O. BOX 845 DANIA, FL. 33004

3. Date Incorporated or Qualified: 8/9/93

3a. Date of Last Report: 3/16/95

4. FEI Number: 65-0435341 — Applied For / Not Applicable

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

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

PAULA SCHIMMEL
3 N. FEDERAL HWY
DANIA, FL 33004

10. Name and Address of New Registered Agent

81 Name: LINDA GOLDTZMAN
82 Street Address (P.O. Box Number is Not Acceptable): 3N. FEDERAL HWY
83
84 City: DANIA FL 85 Zip Code: 33004

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 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 617.0505, Florida Statutes.

SIGNATURE: LINDA GOLTZMAN — (NOTE: Registered Agent signature required when reinstating) — DATE: 4/19/96

Signature: typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	PAULA SCHIMMEL	becomes
STREET ADDRESS	3N. FEDERAL	D
CITY-ST-ZIP	DANIA FL 33004	
TITLE	D	☒ DELETE
NAME	BEAUDET, PHYLYSS	
STREET ADDRESS	56 N. FED HWY	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	D	☒ DELETE
NAME	DELUCIA, MARY	
STREET ADDRESS	300 E DANIA BCH BLVD	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	D	☒ DELETE
NAME	KIRSHENBAUM, DORIS	
STREET ADDRESS	19 N FED	
CITY-ST-ZIP	DANIA	
TITLE	P	☒ DELETE
NAME	MELLER KEN	
STREET ADDRESS	3830 NW 77 AVE	
CITY-ST-ZIP	HWD FL 33024	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☒ Change ☐ Addition

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	LINDA GOLDTZMAN	
1.3 STREET ADDRESS	3N. FEDERAL HWY	
1.4 CITY-ST-ZIP	DANIA FL 33004	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	GOLDIE KOSSOW	
2.3 STREET ADDRESS	3N. FEDERAL HWY	
2.4 CITY-ST-ZIP	DANIA FL 33004	
3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME	SHERIE SELIGMAN	
3.3 STREET ADDRESS	19 N. FEDERAL	
3.4 CITY-ST-ZIP	DANIA, FL 33004	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	300001791683	
5.3 STREET ADDRESS	-04/24/96--01002--003	
5.4 CITY-ST-ZIP	***61.25	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

DB 4-23-96

CR2E037 (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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: LINDA GOLTZMAN — Date: 3/26/96 — Daytime Phone #: 920.2030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR