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 # N95000000442 (2)

1. Corporation Name

THE GEORGE AND IDA MESTEL FOUNDATION, INC.

Principal Place of Business	Mailing Address
2420 NE 194TH STREET MIAMI FL 33180	2420 NE 194TH STREET MIAMI FL 33180

3. Date Incorporated or Qualified **01/30/1995**	**3a.** Date of Last Report

2. Principal Place of Business 21 13909 LeHavre Drive	2a. Mailing Address 26 13909 LeHavre Drive	4. FEI Number 65-0559509	Applied For ☐ Not Applicable ☐
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23 Palm Beach Gardens, FL	City & State 28 Palm Beach Gardens, FL	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24 33410	Country 25 USA	Zip 29 33410	Country 30 USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MESTEL, GEORGE 2420 NE 194TH STREET MIAMI FL 33180	81 Name MESTEL, HARRY 82 Street Address (P.O. Box Number is Not Acceptable) 13909 LeHavre Drive 83 84 City Palm Beach Gardens, FL 85 Zip Code 33410

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 617.0503, Florida Statutes.

SIGNATURE _Harry Mestel_   DATE 4/8/96

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D / NAME MESTEL, HARRY / STREET ADDRESS 220 E TUSCARAWAS STREET / CITY-ST-ZIP CANTON OH 44702	☐ DELETE	1.1 TITLE D.P.T. / 1.2 NAME Mestel, Harry / 1.3 STREET ADDRESS 13909 LeHavre Drive / 1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410	☒ Change ☐ Addition
TITLE D / NAME MESTEL, GEORGE / STREET ADDRESS 2420 NE 194TH STREET / CITY-ST-ZIP MIAMI FL 33180	☒ DELETE	2.1 TITLE D.S. / 2.2 NAME Rich, Elaine / 2.3 STREET ADDRESS 301 W. 57th St., Apt. 15C / 2.4 CITY-ST-ZIP New York, New York 10019-3164	☐ Change ☒ Addition
TITLE D / NAME MESTEL, ANNE / STREET ADDRESS 220 E TUSCARAWAS STREET / CITY-ST-ZIP CANTON OH 44702	☒ DELETE	3.1 TITLE D. / 3.2 NAME Mestel, Stanley / 3.3 STREET ADDRESS 579 Flanders Drive / 3.4 CITY-ST-ZIP North Woodmere, NY 11581-3012	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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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: _Harry Mestel_   _President_ 3/18/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E037 (12/95)