

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 # **P06422** (0)

1. Corporation Name
FUHRMAN-MATT SECURITIES, INC.



Principal Place of Business: **1900 MARKET STREET SUITE 706 PHILADELPHIA PA 19103**
Mailing Address: **1900 MARKET STREET SUITE 706 PHILADELPHIA PA 19103**

3. Date incorporated or Qualified: **06/12/1985**
3a. Date of Last Report: **03/21/1995**
4. FEI Number: **23-2348389**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: **UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301**
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 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: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | PD <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FUHRMAN, BENHAM | 1.2 NAME | |
| STREET ADDRESS | 1681 FLAGLER MANOR CIRCLE | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | WEST PALM BEACH FL | 1.4 CITY - ST - ZIP | |
| TITLE | VD <input checked="" type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MATT, ALBERT C. | 2.2 NAME | |
| STREET ADDRESS | 2 ROSE HILL ROAD | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | MEDIA PA | 2.4 CITY - ST - ZIP | |
| TITLE | SD <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FUHRMAN-HOLIN, SUSAN | 3.2 NAME | |
| STREET ADDRESS | 8364 FISHER ROAD | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | ELKINS PARK PA | 3.4 CITY - ST - ZIP | |
| TITLE | TD <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FUHRMAN, STEVEN M. | 4.2 NAME | |
| STREET ADDRESS | 1623 LONGFELLOW DRIVE | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHERRY HILL NJ | 4.4 CITY - ST - ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FUHRMAN, JUNE S. | 5.2 NAME | |
| STREET ADDRESS | 1681 FLAGLER MANOR CIRCLE | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | WEST PALM BEACH FL | 5.4 CITY - ST - ZIP | |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MASON, SCOTT | 6.2 NAME | |
| STREET ADDRESS | 1532 WAVERLY ROAD | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | GLADWYNE PA | 6.4 CITY - ST - ZIP | |

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

SIGNATURE: *Gerard Fuhrman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96

Date: _____

CR2E034 (12/95)