

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P11277** (1)

1. Corporation Name

STRESS INVEST CORP. N.Y.



Principal Place of Business

**777 BRICKELL AVE
#1200
MIAMI FL 33131
US**

Mailing Address

**777 BRICKELL AVE
STE 1200
MIAMI FL 33131
US**

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

24. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**CIOC, JONANA
POST OFFICE BOX 140103
CORAL GABLES FL 33146**

3. Date Incorporated or Qualified

08/29/1986

3a. Date of Last Report

04/18/1995

4. FEI Number

98-0054931

Applied For
Not Applicable

5. Contribution 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. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

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 further willing, and agree to the obligations of Secretary of State, Chapter 607, Florida Statutes.

SIGNATURE

Sandra Cioe

1/21/96

12. OFFICERS AND DIRECTORS

FILE	NAME	STREET ADDRESS	CITY, ST, ZIP	FILE	NAME	STREET ADDRESS	CITY, ST, ZIP
	PD	ESSENFELD, ERVIN	777 BRICKELL AVE MIAMI FL	☐ DELETE			
	VD	ESSENFELD, ODETTE	777 BRICKELL AVE MIAMI FL	☐ DELETE			
				☐ DELETE			
				☐ DELETE			
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				☐ DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE	NAME	STREET ADDRESS	CITY, ST, ZIP	FILE	NAME	STREET ADDRESS	CITY, ST, ZIP
11. FILE	12. NAME	13. STREET ADDRESS	14. CITY, ST, ZIP	☐ Change ☐ Addition			
21. FILE	22. NAME	23. STREET ADDRESS	24. CITY, ST, ZIP	☐ Change ☐ Addition			
31. FILE	32. NAME	33. STREET ADDRESS	34. CITY, ST, ZIP	☐ Change ☐ Addition			
41. FILE	42. NAME	43. STREET ADDRESS	44. CITY, ST, ZIP	☐ Change ☐ Addition			
51. FILE	52. NAME	53. STREET ADDRESS	54. CITY, ST, ZIP	☐ Change ☐ Addition			
61. FILE	62. NAME	63. STREET ADDRESS	64. CITY, ST, ZIP	☐ Change ☐ Addition			

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. I am an attorney with an address:

SIGNATURE:

John Skubbs

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96

CR2E034 (12/95)