

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 13 PM 2:19

DOCUMENT # P31391 (6)

1. Corporation Name

FRED ASTAIRE DANCE INTERNATIONAL, INC.

Principal Place of Business

300 SO PINE ISLD RD
STE 248
PLANTATION FL 33324
US

Mailing Address

300 SO PINE ISLD RD
STE 248
PLANTATION FL 33324
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1990

3a. Date of Last Report

05/24/1994

4. FEI Number

65-0222067

Applied For

Not Applicable

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 § 199.039,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TOLZIEN, JAMES
300 SO PINE ISLD RD
STE 248
PLANTATION FL 33324

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person or persons authorized to act as registered agent and the corporation)

(Signature of Registered Agent (signature required when not a corporation))

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C
NAME	STEIN, ELLIOT, JR.
STREET ADDRESS	245 PARK AVE, 44TH FL
CITY, ST, ZIP	NEW YORK NY
TITLE	TD
NAME	SCHWIMMER, BARRY A.
STREET ADDRESS	245 PARK AVE, 44TH FL
CITY, ST, ZIP	NEW YORK NY
TITLE	S
NAME	LEVIN, BENJAMIN A
STREET ADDRESS	1200 LAUREL OAK RD, STE 100
CITY, ST, ZIP	VOORHEES NJ
TITLE	DP
NAME	TOLZIEN, JAMES R
STREET ADDRESS	300 SO PINE ISLD RD, STE 248
CITY, ST, ZIP	PLANTATION FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
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	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 reflected 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:

(Signature and typed or printed name of signing officer or director)

JAMES R. TOLZIEN

4/10/95

(305) 423-8484