


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P31419
1. Entity Name
FRANKEL ENTERPRISES, INC.



Principal Place of Business: 1845 WALNUT ST., 16TH FLOOR, PHILADELPHIA, PA 19103
Mailing Address: 1845 WALNUT ST., 16TH FLOOR, PHILADELPHIA, PA 19103



04272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 23-1913415
Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HYMAN, SHERRY LEFKOW
200 ADMIRALS COVE BLVD
JUPITER, FL 33477

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD FRANKEL, BENJAMIN 1845 WALNUT ST., 16TH FL PHILADELPHIA, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST FRANKEL, THOMAS 200 ADMIRALS COVE BLVD JUPITER, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FRANKEL, WILLIAM 1845 WALNUT ST., 16TH FL PHILADELPHIA, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/04/05-60022-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____