

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
1905 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

95 MAY -1 PM 1:55

DOCUMENT # P92000004011 (2)

1. Corporation Name

FALAFEL-ARMON, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

22767 STATE RD Y
#10
BOCA RATON FL 33428
US

Major Address

22767 STATE RD 7
#10
BOCA RATON FL 33428
US

(DO NOT WRITE IN THIS SPACE)

2. Principal Place of Business

21 22767 S.R. 7

2a. Mailing Address

26 22767 STATE RD 7 #10 BOCA RATON FL 33428 US

3. Date Incorporated or Qualified
11/12/1992

3a. Date of Last Report
04/15/1994

4. FE Number
06-1356285

Applied For
Not Applicable

22 #10

27

5. Certificate of Status (Issued) \$8.75 Additional Fee Required

23 BOCA RATON FL

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

24 33428

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8. Does corporation have liability for non-compliance with provisions of 1992 and Florida Statutes Yes No

9. Name and Address of Current Registered Agent

PAYEVSKY, SAGI
22767 STATE RD 7 #10
BOCA RATON FL 33428

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
FL B5 Zip Code

11. Pursuant to the provisions of the laws of the State of Florida, I hereby certify that the above information submitted is true and correct for the purpose of changing its registered office or registered agent of record in the State of Florida. I am authorized to file this report and I hereby accept this appointment as registered agent. I am familiar with the laws of the State of Florida relating to this report.

SIGNATURE

12. NAME	13. ADDRESS CHANGES TO CURRENT AND DATE EFFECTIVE
D BOTNER, JAKOB 8605 W SAMPLE RD #203 CORAL SPRINGS FL	PIT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D PAYEVSKY, SAGI 612 OLEANDER DR FT LAUDERDALE FL	VP's <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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14. I do hereby certify that the information supplied with this filing is accurate, furnished and dated as stated, for the corporation stated in Section 1 of this Florida Statute. I further certify that the information included in this filing is true and correct and that my signature shall have the same legal effect as if made under oath. I am a resident or director of the corporation or the officer or director responsible for filing this report as required by Chapter 607, Florida Statutes, and that my name appears on the filing of this report as an authorized signatory.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95