

W: FILING FEE AFTER MAY 1 IS \$550.00

ANNUAL REPORT  
1997



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

FILED  
Apr 29 1997 8:00am  
Secretary of State

DOCUMENT # P93000011712 (5)

Corporation Name  
BLASBERG MEMORIAL CHAPELS, INC.



Principal Place of Business  
C/O MR. ARTHUR J. GROSSBERG  
3201 NORTH 72ND AVENUE  
HOLLYWOOD FL 33024

Mailing Address  
4126 NORLAND AVE.  
BURNABY BC. CANADA V5G 3S8

3. Date Incorporated or Qualified  
02/16/1993

3a. Date of Last Report  
04/25/1996

4. FEI Number  
36-3876661

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 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	
NAME	WEINSTEIN, JOEL W	1.2 NAME	
STREET ADDRESS	111 SKOKIE BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WILMETTE IL 60091	1.4 CITY-ST-ZIP	
TITLE	DCEO	2.1 TITLE	
NAME	CUTLER, NORMAN	2.2 NAME	
STREET ADDRESS	111 SKOKIE BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WILMETTE IL 60091	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	LOEWEN, RAYMOND L.	3.2 NAME	
STREET ADDRESS	4126 NORLAND AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BURNABY BC., CANADA V5G 3S8	3.4 CITY-ST-ZIP	
TITLE	DAS	4.1 TITLE	
NAME	HYNDMAN, PETER S.	4.2 NAME	
STREET ADDRESS	4126 NORLAND AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BURNABY BC., CANADA V5G 3S8	4.4 CITY-ST-ZIP	
TITLE	P	5.1 TITLE	
NAME	WEINSTEIN, ROBERT A.	5.2 NAME	
STREET ADDRESS	225 W. DUNDEE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BUFFALO GROVE IL 60089-3545	5.4 CITY-ST-ZIP	
TITLE	ST	6.1 TITLE	
NAME	WRIGHT, GARY L.	6.2 NAME	
STREET ADDRESS	800-50 EAST RIVERCENTER BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	COVINGTON KY 41011	6.4 CITY-ST-ZIP	
		ST	
		Rollings, Gregory K.	
		681 North Avenue	
		Jonesboro, GA 30236	

14. I do 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 annual report or supplement to an 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 REQUIRED 4/22/97 (604) 293-6425

CR2E034 (9/96)