FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28 1997 8:00am Secretary of State

1997		DIVISION OF		
DOCUMENT #	P93000507	00	(2)	

	MAS AND COMPANY, INC.			· a					
"Principa! Plac-		Mailing Address					M 131 11111 131	111 1 41 111 415 111	PRI 1881
1965 8 OCEAN	ł DR	1965 8 OCEAN DR							
#MF HALLANDALE FL 33000 HALLANDALE FL 33000-5919		1							
						3. Date Incorporated or Qualified 07/20/1993		of Last Re 7/1996	eport
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number			plied For
21		26				65-0423720		_ 	t Applicable
Suite, Apt	#, €tc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & State	2)	City & State				& Stables Compains Singuis			
23		28				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
7 _{(P}	Country	Zip	Count	iry		8. This corporation has liability for it			
24	25	29	10] Yes 🔲		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	Jistered A	jent	
	LIVAN, ELLEN		8	1 Nam	Ð				
	5 S OCEAN DR		8	2 Stree	t Addre	ss (P.O. Box Number is Not Acceptab	le)		
#M F			ļ.,			- Name -	A		
HAL	LANDALE FL 33009		16	3					
			8	4 City				85 Zip (Code
	10.000	and COZ 1500 Florida Otal da					FL		202010101
office or r	to the provisions of Sections 607,0502 registered agent, or both, in the State c am familiar with, and accept the obligat	and 607.1508, Florida Statutes I Florida. Such change was au	thorized	by the co	orporation	oration submits this statement for the points board of directors. I hereby accep	urpose or c it the appoi	nanging it ntment as	registered
agent La							1.10	مدا	
SIGNATURE	Signature, typed or profest name of registered agent		Registered A	oent signal	ite tedrille	d when reinstating)	DATE Y	Z	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND I	DIRECTOR	S IN 12
HEE	PD	DELETE	1.1 TITLE	E .	01	undent, Greasure Nuruet	75 T	Change	Addition
NAME	SULLIVAN, ELLEN		1.2 NAM	E		Wires	تعن		
STREET ADGRESS	1965 S OCEAN DR #MF		1.3 STRE	ET ADDRES	S				
D(TY+ST+Z)P	HALLANDALE FL 33009			-\$1 - ZIP					
1046	D DELANT HENDY	☐ DELETE	2.1 TITLE	E	7/1	ce Pusident, alus	CPOV L	Change	Addition
NAME	FELDMAN, HENRY		2.2 NAM	-	ł				
STREET ADORESS	1965 S OCEAN DR #MF HALLANDALE FL 33009		•	ET ADDRES	ŝ				ĺ
CITY - ST - Ziff	DVP	DELETE		(-ST-ZIP		444-44-44-44-44-44-44-44-44-44-44-44-44	т	Change	Addition
F:TLF	FELDMAN, BETSY	THE DETELE	3.1 TIYLI		1		L	viridings	rm vongali
NAME STREET ADDRESS	927 CENTER STREET		3 2 NAM	ie Eet addres:	,				1
' '' ' ''	JAMAICA PLAIN MA 02130			let audkes: Y-ST-Zip	`				Ì
CHY-ST ZIP	D	DELETE	4.1 TITU				r	Change	Addition
NAME	FELDMAN, ROY	-V	4. 2 NAN		1		_		
STREET ADDRESS	2753 RUSHLAND ROAD		•	eet addres					
CHY ST ZO	JAMISON PA 18929		1	-ST-ZIP		4			1
THE	D	DELETE	5.1 TITL				Ι	Change	Addition
NAME	SULLIVAN, JAMES	•	5.2 NAM	IE		• •			}
STREET ADDRESS	1965 S OCEAN DR #MF		5.3 STRI	EET ADDRES	s				j
CHY-SI ZIP	HALLANDALE FL		5.4 CITY	-SI-ZIP		· · · · · · · · · · · · · · · · · · ·			
TITLE		DELETE	6.1 TITU				Ţ	Change	Addition
NAME			6.2 NAM	ΙE		i			
SPREET ADORESS			6.3 STRI	eet addres	s				ļ
CHY-ST ZIP	j	***************************************		-ST-ZIP					
 14. I do here! 	by certify that the information supplied	with this filing does not qualify	for the e	xemption	stated	in Section 119.07(3)(i), Florida Statute:	s. I further d	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, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED

BUEN GULLIVAN

1/20/97 154-454-

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