

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
JAMES B. MANNING  
GOVERNOR  
TALLAHASSEE, FLORIDA 32399-0001

APPROVED  
AND  
FILED

MAY 23 AM 10:15

DOCUMENT # P93000059985 (0)

DORFCO, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                                                                                                                                                                                                                 |  |                                                                  |  |                                                                       |  |                                                                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------|--|-----------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------|--|
| 1. Name of Corporation<br>9160 STATE RD. 84<br>DAVIE FL 33324<br>US                                                                                                                                                                             |  | 2a. Mailing Address<br>9160 STATE RD. 84<br>DAVIE FL 33324<br>US |  | 3. Effective Date of Report<br>08/25/1993                             |  | 3a. Date of Last Report<br>05/01/1994                                                       |  |
| 2. Principal Office Address<br>21 9160 W. STATE ROAD 84                                                                                                                                                                                         |  | 2a. Mailing Address<br>26 9160 W. STATE ROAD 84                  |  | 4. Filing Number<br>65-0434508                                        |  | Applied For<br>Not Applicable                                                               |  |
| 2b. City<br>22 DAVIE, FLORIDA                                                                                                                                                                                                                   |  | 2c. State<br>27 DAVIE, FLORIDA                                   |  | 5. Certificate of Initial Filing<br>\$8.75 Additional<br>Fee Required |  | 6. Election Campaign Financing<br>Trust Fund Contribution<br>\$5.00 May Be<br>Added to Fees |  |
| 2d. Zip Code<br>24 33324                                                                                                                                                                                                                        |  | 2e. Country<br>25 USA                                            |  | 2f. Zip Code<br>29 33324                                              |  | 2g. Country<br>30 USA                                                                       |  |
| 9. Name and Address of Current Registered Agent<br>DORFMAN, ANDREW<br>8882 SOUTHWEST 57TH CT.<br>COOPER CITY FL 33328                                                                                                                           |  |                                                                  |  | 10. Name and Address of New Registered Agent                          |  |                                                                                             |  |
| 81 Name                                                                                                                                                                                                                                         |  |                                                                  |  | 82 Street Address, City, State, Zip Code, Country                     |  |                                                                                             |  |
| 83                                                                                                                                                                                                                                              |  |                                                                  |  | 84 City, State, Zip Code                                              |  |                                                                                             |  |
| 85                                                                                                                                                                                                                                              |  |                                                                  |  | 86                                                                    |  |                                                                                             |  |
| 11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida. |  |                                                                  |  | 12. ADDITIONAL CORPORATE OFFICERS, DIRECTORS, AND OTHER OFFICERS      |  |                                                                                             |  |
| 12. D<br>DORFMAN, ANDREW<br>8882 SW 57TH CT.<br>COOPER CITY FL<br>STD<br>DORFMAN, AIMEE<br>8882 SW 57TH CT.<br>COOPER CITY FL<br>V<br>KIEL, ANNE<br>4201 FILMORE ST.<br>HOLLYWOOD FL                                                            |  |                                                                  |  | 13. ADDITIONAL CORPORATE OFFICERS, DIRECTORS, AND OTHER OFFICERS      |  |                                                                                             |  |
| 13. NAME                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STREET ADDRESS                                                                                                                                                                                                                              |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. CITY                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STATE                                                                                                                                                                                                                                       |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. ZIP CODE                                                                                                                                                                                                                                    |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. COUNTRY                                                                                                                                                                                                                                     |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. NAME                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STREET ADDRESS                                                                                                                                                                                                                              |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. CITY                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STATE                                                                                                                                                                                                                                       |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. ZIP CODE                                                                                                                                                                                                                                    |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. COUNTRY                                                                                                                                                                                                                                     |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. NAME                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STREET ADDRESS                                                                                                                                                                                                                              |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. CITY                                                                                                                                                                                                                                        |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. STATE                                                                                                                                                                                                                                       |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |
| 13. ZIP CODE                                                                                                                                                                                                                                    |  |                                                                  |  | 14. CHANGE                                                            |  |                                                                                             |  |
| 13. COUNTRY                                                                                                                                                                                                                                     |  |                                                                  |  | 14. ADDRESS                                                           |  |                                                                                             |  |

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE: *[Signature]* (per)

5-17-95

205-4745683

ORIGINAL FOR FILING