

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000065669 (2)

1. Corporation Name

ARNOLD S. GOLDSTEIN, INC.



Principal Place of Business

384 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442
US

Mailing Address

384 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25 Zip

26 Country

27 City & State

28 Zip

29 Country

30 City

28a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 City

9. Name and Address of Current Registered Agent

**SINGER, MICHAEL S
618 US HIGHWAY ONE
SUITE 104
NORTH PALM BEACH FL 33408**

3. Date Incorporated or Qualified
09/21/1993

3a. Date of Last Report
04/25/1995

4. FEI Number
65-0436527

Applied For
Not Applicable

5. Certificate of Status Desired
 \$6.75 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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 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 renaming)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PO** DELETE
NAME **GOLDSTEIN, ARNOLD S**
STREET ADDRESS **384 S. MILITARY TRAIL**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

384 S. MILITARY TRAIL

TITLE **STD** DELETE
NAME **GOLDSTEIN, MARLENE J**
STREET ADDRESS **384 S. MILITARY TRAIL**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

384 S. MILITARY TRAIL

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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, changed, or on an attachment with an addendum.

SIGNATURE: *Arnold S. Goldstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407-276-1845

CR2E034 (12/95)