

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY -1 PM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000087430 (3)

1. Corporation Name
700 CORP.

Principal Place of Business
700 N. ATLANTIC BLVD.
FT. LAUDERDALE FL 33304

Mailing Address
% LERMAN AND LERMAN
48 FLAGLER ST. PH #101
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/22/1993
3a. Date of Last Report 03/11/1994

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 24 Country 25 Zip 29 Country 30

4. FEI Number 65-0370256
Applied For Not Applicable

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 § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LERMAN, JORGE
48 EAST FLAGLER ST.
PH 101
MIAMI FL 33131

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0902 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 of registered agent, registered agent and not applicable

Signature of registered agent (signature required when removing)

11411

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BERGER, HARRY
STREET ADDRESS	48 E. FLAGLER ST.
CITY, ST, ZIP	MIAMI FL 33141
TITLE	VPD
NAME	BRYSKI, ARON
STREET ADDRESS	48 E. FLAGLER ST.
CITY, ST, ZIP	MIAMI FL
TITLE	VPD
NAME	BERGER, JOSEF
STREET ADDRESS	48 E. FLAGLER ST.
CITY, ST, ZIP	MIAMI FL
TITLE	VPD
NAME	BURREL, BRUCE
STREET ADDRESS	48 E. FLAGLER ST.
CITY, ST, ZIP	MIAMI FL
TITLE	SD
NAME	LERMAN, JORGE
STREET ADDRESS	48 E. FLAGLER ST. PH 101
CITY, ST, ZIP	MIAMI FL
TITLE	TD
NAME	LERMAN, ISIDORO
STREET ADDRESS	48 E. FLAGLER ST PH 101
CITY, ST, ZIP	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
15 TITLE	☐ Change ☐ Addition
16 NAME	
17 STREET ADDRESS	
18 CITY, ST, ZIP	
19 TITLE	☐ Change ☐ Addition
20 NAME	
21 STREET ADDRESS	
22 CITY, ST, ZIP	
23 TITLE	☐ Change ☐ Addition
24 NAME	
25 STREET ADDRESS	
26 CITY, ST, ZIP	
27 TITLE	☐ Change ☐ Addition
28 NAME	
29 STREET ADDRESS	
30 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.02(3)(b), Florida Statutes. I further certify that the information included 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 prepare this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

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