

5-2-97 B-6098 C
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FILED
May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000056642 (9)

1. Corporation Name
DREXEL ASSOCIATES, INC.



Principal Place of Business

1674 MERIDIAN AVE
SUITE 208
MIAMI BEACH FL 33139
US

Mailing Address

1674 MERIDIAN AVE
SUITE 208
MIAMI BEACH FL 33139-2825
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified
07/27/1994

3a. Date of Last Report
04/02/1996

4. FEI Number

65-0507823

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 s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

PREXER ASSOC INC
1674 MERIDIAN AVE SUITE 208
SUITE 600
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name DREXEL ASSOC INC

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

1674 MERIDIAN AVE #208

84 City

M. BEACH

FL

85 Zip Code 33139

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 of officer or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/97

12. OFFICERS AND DIRECTORS

TITLE D
NAME GLUECKMANN, FERDINAND
STREET ADDRESS 1920 SOUTH OCEAN DR., #3A
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D
NAME DUNAEVSKY, DOV
STREET ADDRESS 1920 SOUTH OCEAN DR., #3A
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D
NAME MELAMED, JACOB
STREET ADDRESS 1920 SOUTH OCEAN DR., #3A
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D
NAME GLASWAND, HERMAN
STREET ADDRESS 1920 SOUTH OCEAN DR., #3A
CITY-ST-ZIP HALLANDALE FL 33009

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

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 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.

CR2E034 (9/96)