

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED

Mar 04 1996 8:00 am  
Secretary of State

DOCUMENT # P95000021391 (4)

1. Corporation Name

FLANDERS INVESTMENT HOLDINGS LIMITED, INC.



Principal Place of Business

Mailing Address

% LESLIE ALAN ROZENCWAIG  
2 S. BISCAYNE BLVD., STE. 1 - 3270  
MIAMI FL 33131

% LESLIE ALAN ROZENCWAIG  
2 S. BISCAYNE BLVD., STE. 1 - 3270  
MIAMI FL 33131

3. Date Incorporated or Qualified  
03/15/1995

3a. Date of Last Report

2. ~~40~~ ~~LES LIE ALAN ROZENCWAIG, ESQ.~~ ~~do LES LIE ALAN ROZENCWAIG, ESQ.~~  
21. ~~1 S.E. 3RD AVE~~ 26. ~~1 S.E. 3RD AVE~~

4. FFI Number  
65-0580717

Applied For  
Not Applicable

22. Suite, Apt. #, etc.  
STE 960

27. Suite, Apt. #, etc.  
STE 960

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23. City & State  
MIAMI FLA

28. City & State  
MIAMI FLA

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24. Zip 33131 25. Country USA

29. Zip 33131 30. Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROZENCWAIG, LESLIE A  
2 S. BISCAYNE BLVD.  
ONE BISCAYNE TOWER, SUITE 3270  
MIAMI FL 33131

81. Name LESLIE ALAN ROZENCWAIG, ESQ.  
82. Street Address (P.O. Box Number is Not Acceptable)  
1 S.E. 3RD AVENUE  
83. STE 960  
84. City MIAMI FL 85. Zip Code 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 of registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Leslie Alan Rozencwaig*

(NOTE: Registered Agent signature required when reinstating)

1/26/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
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<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	PD ENIC BARTOLI	do 1 S.E. 3RD AVE STE 960	MIAMI, FLA 33131
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	SD SILVANA BARTOLI	1 S.E. 3RD AVE STE 960	MIAMI, FLA 33131
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Enic Bartoli*

1/30/96 (305) 379-6100  
Date Daytime Phone #

CR2E034 (12/95)