

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra H. Morfham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *P95 0000 22150*

1. Corporation Name

1001 FEDERAL CORPORATION

Principal Place of Business

**1228 Alton Rd.
Miami Beach, FL 33139**

Mailing Address

**1228 Alton Rd.
Miami Beach, FL 33139**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified
3/20/95

3a. Date of Last Report

4. FEE Number
65-0567742

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

**Paul Bass
201 Alhambra Circle, Suite 801
Coral Gables, FL 33134**

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 of person named registered agent must be typed and signed)

(Signature of Agent or Director must be typed and signed)

DAP

12. OFFICERS AND DIRECTORS

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1996

1. TITLE	☐ Change ☒ Addition
1.1 NAME	President
1.2 STREET ADDRESS	Dov Dunaevsky
1.3 CITY, ST, ZIP	1228 Alton Rd
2. TITLE	☐ Change ☒ Addition
2.1 NAME	Secretary-Treasurer
2.2 STREET ADDRESS	James Resnick
2.3 CITY, ST, ZIP	1228 Alton Rd.
3. TITLE	☐ Change ☐ Addition
3.1 NAME	Miami Beach, FL 33139
3.2 STREET ADDRESS	
3.3 CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
4.1 NAME	
4.2 STREET ADDRESS	
4.3 CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
5.1 NAME	
5.2 STREET ADDRESS	
5.3 CITY, ST, ZIP	
6. TITLE	☐ Change ☐ Addition
6.1 NAME	300001757553
6.2 STREET ADDRESS	-03/26/96--01089--014
6.3 CITY, ST, ZIP	***200.00

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

JAMES RESNICK

3-4-96 300 673 4981
SG 3-26-96

CR2E034 (12/95)