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

DOCUMENT #

1. Corporation Name

P95000033316 (7)

CAHL	EDWAHD FEIGENBAUM,	INC.								
Principa' Place	of Business	Mailir	ng Address				-{ I TO TO TO THE TOTAL OF THE T	AIH BBILL BBIBL		11101 HEA 11 C HI 1 31 11
214 SWEETWATER CREEK DRIVE E. LONGWOOD FL 32779			214 SWEETWATER CREEK DRIVE E. LONGWOOD FL 32779			E,				
							3. Date Incorporated or Qualified 04/28/1995	3a. Date	of Last R	eport
2. Principal Pla	· ·	2a. № 26	lailing Address		-		4. FELINUMber 59-3310834	<u> </u>		Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		28 C	ity & State				Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Zip [4]	Country 25	29 Zi		30 Co.	intry		8. This corporation has liability for Florida Statutes	intangible ta No		
	9. Name and Address of Currer	t Register	ed Agent		L	,	10. Name and Address of New F	egistered /	lgent	
-					81	Name				
343 AL	NW FIRM OF LAWRENCE J SPI MERIA AVENUE	EGEL CHI	RTD		82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
CORAL	. GABLES FL 33134				83					~ ************************************
					84			FL	1 1 1	Code
SIGNATURE	id agent, or both, in the State of Florin, and accept the obligations of, Sect	1001 1001 1101				oration's board	tion submits this statement for the pui d of directors. I hereby accept the app		nging its re registered	agent. I am
12.	OFFICERS AN			13.	- 40.	in any more red area	ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	PS (N 12
100	P		☐ DEFELF	111	ITLE				Change	Addition
NAME	FEIGENBAUM, CARL E			12 N/	AME					
STREET ADDRESS	214 SWEETWATER CREEK	DRIVE E.		1.3 \$1	REET	ADDRESS				
C-1 Y - S1 - 74*	LONGWOOD FL 32779			1.4 00	1Y-S	T-ZIP				
TiTaf			DELETE	2 1 1	TLE				Change	Addition
NAME				2 2 N/	M£					
STREET ADDRESS				2.3 \$1	REET	ADDRESS				
CHY-ST ZIP			Fil po ere	2 4 C1		1 - Z(P				
THE			DELETE	3 1 Te			•	· · [] Change	☐ Addition
NAME STREET ADDRESS				3.2 N/						
CITY - ST - Zif-				- E		ADDRESS				
HILE			DELETE	3.4 CI 4 1 TI		1 - ZIP			1 Channa	C) Addition
NAME				4 2 NA				L] Change	☐ Addition
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STREET ADDRESS						ADDRESS				
OTY-ST-ZP				5 4 CI		•				
TILF			DELETE	6. 1 Ti] Change	Addition
NAME				6.2 NA	ME			<u>-</u>	-	-
STREET ADDRESS				6.3 ST	REET.	ADDRESS				
City-St-ZiF				6 4 CI	[Y-S1	1 - 21P				

14. I do horeby 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 outs, 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 Bock 13 if changed, or on an all achment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date

Date

Dete

Dete

Description

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