## 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 12 1997 8:00am Secretary of State

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BEN'S WATCH & CLOCK REPAIR, INC.					
Principal Place	of Business	Mailing Address		a innuinat lin iniet mitty antit dibit dibiti biliti	(CEAC (190) Dird) (IAIA (IAI 190)
7500 W. COL	AMERCIAL BLVD.	7500 W. COMMERCIAL	. BLVD.		
#5	P1 46616	#5			
LAUDERHILL	FL 83319	LAUDERHILL FL 33318		3. Date Incorporated or Qualified 3a. Da	ate of Last Report
2				09/22/1995	
2. Principal Pla	ace of Business	2a. Mailing Address	<del></del>	4. FEI Number	Applied For
21		26		65-0613412	Not Applica
Sulte, Apt. #	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additiona
22	<del></del>	27		S. Continuate of Status Dosined	Fee Required
Oity & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be
23	<del></del>	28	<del></del>	Trust Purio Continuation	Added to Fees
_ Zip	Country	Zip	Country	8. This corporation has liability for Intangible	tax under s 199.032,
24]	9, Name and Address of Curi	29	30	Florida Statutes A. Yes No.  10. Name and Address of New Registere	d & mout
74	S. Hanto Milo Hadros or Carl	ione trogistoreu Agont	81 Name	10, Italia and Address of New Registere	u Agent
APPEL, I	REN				·
	COMMERCIAL BLVD.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
#5	AAHIIIPIIANA PEID		83	<del> </del>	
· · · · · · · · · · · ·	HILL FL 33319				
- D100L11	1102 12 00010		84 City	F	85 Zip Code
12.	PTD	AND DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addit
NAME	APPEL, BEN		1,2 NAME		C Augusto C 1000
STREET ADDRESS	7500 W. COMMERCIAL BL	VD.#5	1.3 STREET ADDRESS	,	
CITY-ST-ZIP	LAUDERHILL FL 33319		1,4 CITY-ST-ZIP		
TITLE	SVD	DELETE	2.1 TITLE		Change Additi
NAME	appel, sylvia		2.2 NAME		
STREET ADDRESS	7500 W. COMMERCIAL BL	VD.#5	2.3 STREET ADDRESS	•	
CITY-ST-ZIP	LAUDERHILL FL 33319		2.4 CITY-ST-ZIP	<u> </u>	
TITLE		DELETE	3. 1 TITLE		Change Additi
NAME			3 2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CHTY-ST-ZIP			3.4 CITY - ST - ZIP		·· <u>··</u> ···
TÌTLE		DELETE	4 1 TITLE		Change Additi
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C(TY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		FT NO FTE			
NAME		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS		DELETE	5.2 NAME		Change Additi
		DELETE	5.2 NAME 5.3 STREET ADDRESS		Change Addition
CHTY-ST-ZIP			5.2 NAME 5.3 STREET ADDRESS 5.4 DTY-S1-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 6.1 TITLE		
CITY-ST-ZIP TITLE NAME			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		
CITY-ST-ZIP TITLE			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 6.1 TITLE		

4. 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 cath; 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:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ate Day

R2F024 (12/9