

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000073604 (7)

1. Corporation Name
HELEN DANIELS #8, INC.



Principal Place of Business
19707 TURNBERRY ISLE #24J
NORTH MIAMI BEACH FL 33180

Mailing Address
19707 TURNBERRY ISLE #24J
NORTH MIAMI BEACH FL 33180

3. Date Incorporated or Qualified 09/21/1995	3a. Date of Last Report
4. FEI Number 05-0621051	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. 193.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

KLEIN, MITCHELL D
1120 EAST HALLANDALE BEACH BOULEVARD
HALLANDALE FL 33009

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.0532 and 607.1506, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0532, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this report on behalf of the corporation.

Name of Registered Agent (Type or Print Name of Registered Agent)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D SCHWARTZ, DANIEL 19707 TURNBERRY ISLE, #24J NORTH MIAMI BEACH FL 33180	1. TITLE	☐ Change ☐ Addition
NAME	D SCHWARTZ, HELEN 19707 TURNBERRY ISLE, #24J NORTH MIAMI BEACH FL 33180	2. NAME	☐ Change ☐ Addition
STREET ADDRESS		3. STREET ADDRESS	☐ Change ☐ Addition
CITY, ST, ZIP		4. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		5. TITLE	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
STREET ADDRESS		7. STREET ADDRESS	☐ Change ☐ Addition
CITY, ST, ZIP		8. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	☐ Change ☐ Addition
STREET ADDRESS		11. STREET ADDRESS	☐ Change ☐ Addition
CITY, ST, ZIP		12. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	☐ Change ☐ Addition
STREET ADDRESS		15. STREET ADDRESS	☐ Change ☐ Addition
CITY, ST, ZIP		16. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	☐ Change ☐ Addition
STREET ADDRESS		19. STREET ADDRESS	☐ Change ☐ Addition
CITY, ST, ZIP		20. CITY, ST, ZIP	☐ Change ☐ 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 a 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, unchanged, or on an attachment to an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96 305-458-0518
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CR2E034 (12/95)