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

PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

P95000080037 (1)

A STEP AHEAD, INC.

Principal Place of	f Business

Mailing Address

4700-B SHERIDAN STREET HOLLYWOOD FL 33021

4700-B SHERIDAN STREET HOLLYWOOD FL 33021



				10/18/1995				
2. Principal Plac	ce of Business N.E. 163 ST	2a. Mailing Address 26 1609 N.I	= 1/	3 St.	4. FEI Number 65-06213	36	Applied For	
Suite, Apt. #,	etc. 165 21	26 1609 N. l Suite, Apt. #, etc.	<u> </u>	D 31-	65-00010		Not Applicable	
22 N. M.	AMI BEACH.	27 N. MIAM	1 BE	ACH	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State City & State 23 FLORIDA 28 FLORIDA					Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 24 331	62 Country SA	29 33162	Country 30 C	SA		🔀 No		
	9. Name and Address of Curren	t Registered Agent		T	10. Name and Address of New R	egistered Ag	ent	
KERTZNUS, JEFFREY 1861 N.E. 2100TH ST.				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)				
n miam	II BEACH FL 33179		83					
			84	City		P	85 Zip Code	
or registered familiar with	the provisions of Sections 607,0502 diagent, or both, in the State of Franci, and accept the obligations of, Sectional Sections of Section	ia. Such change was authoriza: on 607.0505, Florida Statutes.	i by the corp	named corporation's boar	ation submits this statement for the pur d of directors. Thereby accept the appo	pose of changointment as re	ing its registered office gistered agent. I am	
12.	OFFICERS AND		13.	a signature response.	ADDITIONS/CHANGES TO OFFI		IRECTORS IN 12	
TILLE	PSD	☐ DELETE	1 1711LE				Change	
NAME	KERTZNUS, JEFFREY		1.2 NAME				· -	
STREET ADDRESS	1861 N.E. 2100TH ST.		1.3 STEEF	LADDRESS				
City-ST-ZIF	NORTH MIAMI BEACH FL 3	3179	1.4 CJ[Y-					
TITLE	VTD	☐ DELETE	2 1 TiTLE				Change	
NAME	KERTZNUS, ESTHER		2.2 NAME				-	
STREET ADDRESS	1861 N.E. 2100TH ST.		2.3 \$1866	ADDRESS				
CITY-ST-ZIP	NORTH MIAMI BEACH FL 3	3179	2.4 CHTY - 5	S*-ZIP				
TITLE		☐ DELETE	3 1 TITLE				Change Addition	
NAME			3.2 NAME					
STREET ADDRESS			33 STREE	f ADDRESS				
CITY-ST-ZIP			3.4 C-TY - 5	ST - ZiP				
T-TLE		☐ DELETE	4 1 T] L F				Change	
NAME			4.2 NAME					
STREET ADDRESS			4 3 STREE	ADDRESS				
CITY-ST-ZIF			4 4 CHY - 9	6E - 24P				
TITLE		☐ DELETE	5 1 TIFLE				Change Addition	
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREE	ADDRESS				
CITY-ST-ZIP			5.4 CiTY - 5	ST - ZIP				
TITLE		DELETE	6 1 Til. E				Change	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STAFF	ADORESS				
CITY - ST - ZIP			6.4 CITY - S	61 - 7iP				
14. I do hereby	certify that the information supplied vi	th this fling is voluntarily furnish	red and doc	s not quality fo	r the exemption stated in Section 119.0	07(3/k), Florid	a 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 trusted 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:

KERTZNUS 4-28-96 (305) 935-1776