## 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

## P95000082349 (8) DOCUMENT # 1. Corporation Name

ARYEH	EDITIONS, INC.									
Principal Place of	of Business	Ma	eiling Address				1 CONTINUE TO THE PERIOD DESIGNATION OF THE PERIOD CONTINUE TO THE P	<b>.</b>	1911 <b>/ 1189</b> 1414 1	J1818 1811 1881
7700 N. KENDALL DR., SUITE 805 7700 N			7700 N. KENDALL DR.,	BERENFELD. SPRITZER. SHECTER & SHEER O.N. KENDALL DR., SUITE 805						
			MIAMI FL 33156			3. Date Incorporated or Qualified 10/26/1995			port	
Principal Place of Business			2a. Mailing Address 26			4. FEI Number 65-06/543/				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		Fee Hequired		
City & State			City & State			Election Campaign Financing     Trust Fund Contribution	<u> </u>	Added to rees		
Z(p 24	Country 25	59	Zip	30	intry			cN [T]		199.032,
	9. Name and Address of Current	Regis	tered Agent	=			10. Name and Address of New F	legistere	d Agent	
					81	Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD						Street Addre	s (P.O. Box Number is Not Acceptable)			
	ION FL 33324			,	83					
					84	City			85 ZK	Code
		<u></u>		<u></u> <del></del>	L	l		F		naintared office
or registers	o the provisions of Sections 607,0602 of agent, or both, in the State of Florid n, and accept the obligations of, Section	a Suct	h changé was authoriz	red by the d	corp	named corpora oration's board	d of directors. I hereby accept the app	ointment	as registered	agent. I am
SIGNATURE _	Signature, typed or printed name of registerico agent		umbor ii nga	NTC Front Issue	سنده	r Lsignature required	advan robehi noi	DATE		
12.	Signature: typed or printed name of registratio agost a OF FICERS AND	DIREC	appicatio (N.	13.	17(3:5	1 sig te die leigh (so	ADDITIONS/CHANGES TO OFF			HS IN 12
TITLE	D		DELFTE	1.11	TILE				Change	Addit.on
NAME	DRUCK, ARNOLD			1.2 N	AME					
STREET ADDRESS	7700 N. KENDALL DR., SUITE	805		1.3 \$	TREET	I ADORESS				
CITY - ST - ZIP	MIAMI FL 33156			1.4 C	HY-5	ST - ZIP				
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NAME				421						
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TITLE			L.J beseit		NAME					
NAME						T ADDRESS				
STREET ADDRESS										
CITY-ST-ZIP	and further the information supplied	azith thi	is filing is voluntarily fur	nished and	d do	\$1-7IP es not qualify f	or the exemption stated in Section 11	9.07(3)(k)	Florida Statu	ites. I further

To hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 113-07-05(k), more activity that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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: Orward Druck ARNOLD SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DRUCK APRIL 22, 1996 305-274-4600