

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000012190 (9)

1. Corporation Name
FOREST LAWN HOLDINGS, INC.



Principal Place of Business
200 EAST BROWARD BLVD
SUITE 1900
FORT LAUDERDALE FL 33301

Mailing Address
200 EAST BROWARD BLVD
SUITE 1900
FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 12980 S.W. 48TH ST
Suite, Apt. #, etc.
22
City & State
23 FORT LAUDERDALE, FL
Zip
24 33330-2339 Country
25 USA
2a. Mailing Address
26 12980 S.W. 48TH ST
Suite, Apt. #, etc.
27
City & State
28 FORT LAUDERDALE, FL
Zip
29 33330-2339 Country
30 USA

3. Date Incorporated or Qualified
02/06/1997
4. FEI Number
N/A
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
DESIDERIO, PETER L ESQ
200 EAST BROWARD BLVD
SUITE 1900
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name
MR. STEVEN FISHMAN
82 Street Address (P.O. Box Number is Not Acceptable)
83 12980 S.W. 48TH STREET
84 City
FORT LAUDERDALE FL 85 Zip Code
33330-2339

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable
STEVEN FISHMAN
DATE
1-8-98

12. OFFICERS AND DIRECTORS
TITLE
P PRESIDENT
NAME
STEVEN FISHMAN
STREET ADDRESS
12980 S.W. 48TH STREET
CITY-ST-ZIP
FORT LAUDERDALE, FL 33330
TITLE
V VICE PRESIDENT
NAME
ARIELLE NUREYEV
STREET ADDRESS
3301 S.W. 13TH ST, APT X-324
CITY-ST-ZIP
GAINESVILLE, FL 32608
TITLE
S SECRETARY
NAME
ROSE FISHMAN
STREET ADDRESS
4834 N.W. 9TH AVE, APT 1-109
CITY-ST-ZIP
POMPANO BEACH, FL 33064
TITLE
T TREASURER
NAME
JACK FISHMAN
STREET ADDRESS
8851 SUNRISE LAKES BLVD, APT 116
CITY-ST-ZIP
SUNRISE, FL 33322
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 a statement with address.

SIGNATURE:

1-8-98 (954) 434-9777

CR2E034 (10/97)