

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

1-2

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # S04743 (8)

1. Corporation Name

CDFI, INC.



Principal Place of Business

Mailing Address

20803 BISCAYNE BLVD  
103  
AVENTURA FL 33180  
US

20803 BISCAYNE BLVD  
103  
AVENTURA FL 33180  
US

3. Date Incorporated or Qualified

10/05/1990

3a. Date of Last Report

04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

4. FEI Number

65-0232791

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. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFE, LEON J ESQ.  
BERMAN, WOLFE & RENNERT, P.A.  
35TH FLOOR  
MIAMI FL 33131-2130

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100 S.E. 2nd Street

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as 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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME LAMONDIN, RICHARD  
STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103  
CITY-ST-ZIP AVENTURA FL

☐ DELETE

TITLE DV  
NAME SARDACHUK, GRANT E.  
STREET ADDRESS CULLINGWORTH, ROSS  
CITY-ST-ZIP 181 BAY STREET WU

☒ DELETE

TITLE D  
NAME PRINGLE, BILL  
STREET ADDRESS 181 BAY STREET, SUITE 103  
CITY-ST-ZIP TORONTO ON

☐ DELETE

TITLE ST  
NAME SEMLER, DANIEL  
STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103  
CITY-ST-ZIP AVENTURA FL

☐ DELETE

TITLE VP  
NAME HALL, C.B. J.  
STREET ADDRESS 20803 BISCAYNE BLVD.  
CITY-ST-ZIP AVENTURA FL

☐ DELETE

TITLE VP  
NAME ALPER, SUSAN  
STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103  
CITY-ST-ZIP AVENTURA FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE DV  
2.2 NAME Cullingworth, Ross  
2.3 STREET ADDRESS 181 Bay Street, Suite 4200  
2.4 CITY-ST-ZIP Toronto, ON

☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 181 Bay Street, Suite 4200  
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME Hall, C.B. Jr.  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☒ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel Semler

4/30/96

Date

(305) 935-0255

Daytime Phone #

CR2E034 (12/95)

**CDFI, INC.**  
**1996 CORPORATION ANNUAL REPORT**  
**(Additional Officers)**

**V**  
**Visentin, Robert**  
**181 Bay Street, Suite 4200**  
**Toronto, Ontario M5J 2T3**

**AS**  
**Zessner, Michael**  
**181 Bay Street, Suite 4200**  
**Toronto, Ontario M5J 2T3**