

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S16862 (2)

1. Corporation Name

MONTEFEL, INC.

Principal Place of Business

18932 SW 5 WAY
FT LAUDERDALE FL 33326
US

Mailing Address

1304 SW 160 AVE
STE 2170
FT LAUDERDALE FL 33326
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/04/1990

3a. Date of Last Report

04/21/1994

4. FEI Number

65-0242107

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MONTEFEL, MARTIN
18932 SW 5 WAY
FT LAUDERDALE FL 33326**

10. Name and Address of New Registered Agent

81 Name

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

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 consent to the appointment, of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable

MARTIN MONTEFEL

NOTE: Registered Agent signature required when registering

04/19/95

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

MONTEFEL, MARTIN

STREET ADDRESS

18932 S W 5 WAY

CITY - ST - ZIP

PLANTATION FL

TITLE

D

NAME

MONTEFEL, DIANA, B

STREET ADDRESS

18932 S W 5 WAY

CITY - ST - ZIP

PLANTATION FL

TITLE

D

NAME

GETZ, STEVEN M.

STREET ADDRESS

2080 NE 27 ST

CITY - ST - ZIP

LIGHTHOUSE POINT FL

TITLE

D

NAME

GREENBLATT, MELISSA M

STREET ADDRESS

110 COYLE ST

CITY - ST - ZIP

PORTLAND ME

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 a supplemental report with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARTIN MONTEFEL

04/19/95 (205) 394-2700
TALLAHASSEE, FLORIDA