

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S46121** (7)

1. Corporation Name

DATA FINANCIAL SERVICES, CORP.



Principal Place of Business

1932 TEMPLD DRIVE
WINTER PARK FL 32789
US

Mailing Address

1932 TEMPL DR
WINTER PARK FL 32789
US

3. Date Incorporated or Qualified
04/15/1991

3a. Date of Last Report
01/19/1995

2. Principal Place of Business

21 **DATA FINANCIAL SERVICES CORP**

2a. Mailing Address

26 **DATA FINANCIAL SERVICES CORP**

4. FEI Number
65-0272340

Applied For
Not Applicable

Suite, Apt. #, etc.

22 **821 MAYFIELD AVE**

Suite, Apt. #, etc.

27 **821 MAYFIELD AVE**

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

23 **WINTER PARK, FL**

City & State

28 **WINTER PARK, FL**

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

24 **F/32789**

Country

25 **ORANGE**

Zip

29 **32789**

Country

30 **ORANGE**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**FEINBERG, ABRAHAM DAVID
1932 TEMPL DR
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name **Feinberg, ABRAHAM DAVID**
82 Street Address (P.O. Box Number is Not Acceptable) **821 MAYFIELD AVE**
83 **WINTER PARK, FL**
84 City **FL** 85 Zip Code **32789**

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, if not applicable

Name, typed or printed name of new registered agent, if not applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> DELETE
NAME	FEINBERG, ABRAHAM DAVID	
STREET ADDRESS	1932 TEMPL DR	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	FEINBERG, ABRAHAM DAVID	
STREET ADDRESS	1932 TEMPL DR	
CITY - ST - ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	DPS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	Feinberg, ABRAHAM DAVID	
3. STREET ADDRESS	821 MAYFIELD AVE	
4. CITY - ST - ZIP	WINTER PARK, FL 32789	
5. TITLE	T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. NAME	DORIS FEINBERG	
7. STREET ADDRESS	821 MAYFIELD AVE	
8. CITY - ST - ZIP	WINTER PARK, FL 32789	
9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		
11. STREET ADDRESS		
12. CITY - ST - ZIP		
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. 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 an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DORIS FEINBERG

3-4-96 **407-6443282**
Date Daytime Phone #

CR2E034 (12/95)