SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPAREMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

S53354

(4)

CHURCH'S INDEPENDENT FRANCHISEE ASSOCIATION, INC

·	IOTHOLL AGGODIATION	4, 1140		
Principal Place of Business	Mailing Address		1	H OLEH OLOH OHOL BYOLL OLOH ELDIN BLOCK HOOF
7154 SW 47TH ST. Miami Fl 33155	7154 SW 47TH ST. MIAMI FL 33155			
			 Date Incorporated or Qualifie 05/16/1991 	d 3a, Date of Last Report 05/01/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0278773	Not Applicable
Suite, Apt. # etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			L.J Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip Country	28 Zip	Country	Trust Fund Contribution P This corporation has liability:	for intangible tax under s. 199.032,
24 25	29	30	Florida Statutes	Yes No
9. Name and Address of Curre	······	1001	10. Name and Address of New	Registered Agent
		81 Name		
FEINSWOG, BENJAMIN S.		82 Street	Address (P.O. Box Number is Not Accep	(ablo)
7154 SW 47TH ST.		02 Street	Address (1.6. Box Humber is Not Accep	(abic)
MIAMI FL 33155		83		
		84 City		85 Zip Code
				FL
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Statiagent Tam familiar with, and accept the oblig SIGNATURE Signature systems for the process.	e of Florida, Such change was gations of Section 607,0505, F	authorized by the corp	oration's board of directors. Thereby acc	ept the appointment as registered
12. OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TILE DP	DELETE	1 1 1111 E		Grange Addition
NAME FEINSWOG, BENJAMIN S.		1.2 NAME		
STREET ADDRESS 7154 SW 47TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL	DELETE	1 4 CITY - ST - 7IP		Change Addition
TITLE	☐ therete	2.1 TITLE	İ	Charge Rab son
NAME		2.2 NAME]	
STREET ADDRESS		2.3 STREET ADDRESS		
CHY-SI-ZIP	DELETE	2 4 City - St - ZiP 3 1 TITLE		Change Addition
NAME		3.2 NAME		_ _
STREEL ADDRESS		3.3 STHEET ADDRESS		
City-St-ZiP		34 CITY-ST-ZIP		
TiTLE	DELETE	4.1 Title		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CHY - ST - ZIP		
THLE	DELETE	5.1 firth		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY - ST - ZIP	·	5 4 CITY - ST - ZIP		
TITLE	DELETE	6 1 TITLE	7000018	7255 Addition 1023023
NAME		6.2 NAME	-06/24/960	1023023
STREET ADDRESS		6.3 STREET ADDRESS	***225.00) .
Crty-St-ZiP		6.4 City - S1 - ZiP		X\\(\rac{1}{2}\right)

14. I do hereby certify that the information supplied with this king is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statute 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 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 617, Florida Statutes that my name appears in Block 12 or Block 13 or on an attachment with an address. SIGNATURE:

SIGNATURE AND TYPED OF FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)