

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 7:50

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # S75034 (6)

1. Corporation Name

AJD ENTERPRISES, INC.

Principal Place of Business

**% REBOUL MACMURRAY HEWITT MAYNARD KRISTOL
45 ROCKEFELLER PLAZA
NEW YORK NY 10111**

Mailing Address

**% REBOUL MACMURRAY HEWITT MAYNARD KRISTOL
45 ROCKEFELLER PLAZA
NEW YORK NY 10111**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
08/21/1991

3a. Date of Last Report
03/09/1994

4. FEI Number
58-1956367

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 (32)
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOGGS, DAVID M.
111 MADISON ST
TAMPA FL 33602**

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 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 reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
KRISTOL, HOWARD G
45 ROCKEFELLER PLAZA
NEW YORK NY**

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
KRISTOL, HOWARD G
45 ROCKEFELLER PLAZA
NEW YORK NY**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DC
DUNLAP, ALBERT J
528 ALEXANDER PALM RD
BOCA RATON FL**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

**422 Addison Park Lane
Boca Raton, Florida 33432**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DV
DUNLAP, JUDITH A
528 ALEXANDER PALM RD
BOCA RATON FL**

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

☒ Change ☐ Addition

**422 Addison Park Lane
Boca Raton, Florida 33432**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 110.07(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.

Lastly, I certify that the Florida stockholders

were notified on or before April 10, 1995, of the value of their stock.

SIGNATURE: Howard G. Kristol

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD G. KRISTOL

PRESIDENT

4/24/95

(Date)

(212) 841-5701

(Telephone #)