

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S96159** (6)

1. Corporation Name
I. STERN, INC.



Principal Place of Business

**36 N.E. 1ST STREET
SUITE 1038
MIAMI FL 33131**

Mailing Address

**1100 S. FEDERAL HWY
SUITE 4
BOYNTON BEACH FL 33435
US**

2. Principal Place of Business

21 **1036**

Suite, Apt. #, etc.

22 **169 E. Flagler St**

City & State

23 **Miami, FL**

Zip

24 **33131**

Country

25 **USA**

2a. Mailing Address

26 **1100 S. FEDERAL HWY**

Suite, Apt. #, etc.

27 **SUITE 4**

City & State

28 **BOYNTON BEACH FL**

Zip

29 **33435**

Country

30 **US**

3. Date Incorporated or Qualified

11/21/1991

3a. Date of Last Report

04/26/1995

4. FEI Number

65-0298975

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

g. Name and Address of Current Registered Agent

**FELDER, LAWRENCE D.
1326 S.E. THIRD AVENUE
FORT LAUDERDALE FL 33316**

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the corporation

Signature, typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D STERN, ISAAC**
STREET ADDRESS **36 NE 1ST ST., #1038**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **D STERN, LESLIE**
STREET ADDRESS **36 NE 1ST ST., #1038**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS **169 E. Flagler St.**
14 CITY-ST-ZIP **Miami, FL. 33131 # 1036**

2. TITLE ☒ Change ☐ Addition

22 NAME
23 STREET ADDRESS **169 E. Flagler St.**
24 CITY-ST-ZIP **Miami, FL. 33131 # 1036**

3. TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 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

ISAAC STERN

5/20/96

(Date)

305-577-3933

Daytime Phone #

CR2E034 (12/95)