

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

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DEPARTMENT OF CORPORATIONS

1996 5-1-96 B-5487 C

DOCUMENT # V06866

(0)

1. Corporation Name

ANDREWS & WALD, INC.

Principal Place of Business

5344 MONTEREY CIRCLE, #88  
DELRAY BEACH FL 33484-8377

Mailing Address

5344 MONTEREY CIRCLE, #88  
DELRAY BEACH FL 33484-8377



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

WALD, E. STEVEN  
1801 CLINT MOORE ROAD  
SUITE 109  
BOCA RATON FL 33487

3. Date Incorporated or Qualified

01/15/1992

3a. Date of Last Report

08/10/1995

4. FEI Number

65-0305427

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

10. Name and Address of New Registered Agent

81

Name

WALD, E. STEVEN

82

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

5344 MONTEREY CIRCLE #88

83

84

City

DELRAY BEACH

FL

85

Zip Code

33484

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

E. STEVEN WALD

*[Signature]*

4-29-96

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

WALD, E. STEVEN

1801 CLINT MOORE ROAD

BOCA RATON FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

COBS

WALD, LINDA

1801 CLINT MOORE RD 100

BOCA RATON FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

COBS

ORENSTEIN, BEA

1801 CLINT MOORE RD 100

BOCA RATON FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

5344 MONTEREY CIRCLE #88

DELRAY BEACH, FL 33484-8377

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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☐ 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 119.07(3)(b), 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 appointed 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:

E. STEVEN WALD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

DATE

407.496.2931

DAYTIME PHONE

CR2E034 (12/95)