

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 MAY -1 PM 3: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V35740

(2)

1. Corporation Name

I & E INVESTMENT CORPORATION

Principal Place of Business

1501 E. HALLANDALE BCH. BLVD.
#310
HALLANDALE FL 33009
US

Mailing Address

1501 E. HALLANDALE BCH. BLVD.
#310
HALLANDALE FL 33009
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1992

3a. Date of Last Report

05/01/1994

4. FBI Number

65-0332420

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 § 190.030,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Co.

25

County

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Co.

30

County

9. Name and Address of Current Registered Agent

CSC NETWORK
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

01 Name

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

03

04 City

FL

05

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 his or her association

(DATE) Registered Agent signature required when transferring

DATE

12. OFFICERS AND DIRECTORS

TITLE PAS
NAME ROSEN, ISAAC
STREET ADDRESS 1501 E. HALLANDALE BEACH BLVD.
CITY ST ZIP HALLANDALE FL 33009

TITLE VST
NAME ROSEN, EUGENIA
STREET ADDRESS 1501 E. HALLANDALE BEACH BLVD.
CITY ST ZIP HALLANDALE FL 33009

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

14. I, the undersigned, 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 empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment, with an address.

SIGNATURE:

Signature: Isaac Rosen 4-28-95 305-456-3535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR