

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 DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **V42735** (3)

1. Corporation Name

**CHAMPION INDUSTRIES, INC.**



Principal Place of Business

Mailing Address

**1674 COLLINS AVENUE  
MIAMI BEACH FL 33139**

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MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified

**06/09/1992**

3a. Date of Last Report

**04/18/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**65-0351385**

Applied For

Not Applicable

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00** May Be  
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BARDFELD, J.D. SKIP  
8011 RODMAN STREET  
HOLLYWOOD FL 33023**

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 state if applicable

(NOTE: Registered Agent's signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**D/P  
BLACHER, JACOB  
1674 COLLINS AVENUE  
MIAMI BEACH FL**

11 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS

CITY - ST - ZIP

12 NAME  
13 STREET ADDRESS

14 CITY - ST - ZIP

TITLE ☐ DELETE

**D/S  
BLACHER, JOSE  
1674 COLLINS AVENUE  
MIAMI BEACH FL**

21 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS

CITY - ST - ZIP

22 NAME  
23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS

CITY - ST - ZIP

42 NAME  
43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS

CITY - ST - ZIP

61 TITLE  
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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Jose Blacher*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**JOSE BLACHER**

**6/10/96**

Date

Signature Printed Name

CR2E034 (3/96)