

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathias  
Secretary of State  
Tallahassee, Florida 32399-0001

APPROVED  
AND  
FILED

95 MAY 11 AM 10:35

DOCUMENT # **521223** (8)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ROBBINS, TUNKEY, ROSS, AMSEL, RABEN & WAXMAN, P. A.**

Principal Office: **2250 SOUTHWEST THIRD AVENUE MIAMI FL 33129**  
Mailing Address: **2250 SOUTHWEST THIRD AVENUE MIAMI FL 33129**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified <b>12/29/1976</b>		3a. Date of Last Report <b>05/01/1994</b>	
4. FEI Number <b>59-1709242</b>		Applied For NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
7. This corporation has liability for franchise tax under Chapter 607, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
21. Principal Place of Business	2a. Mailing Address	22. State, Apt. # etc.	27. State, Apt. # etc.
23. City & State	28. City & State	24. City	25. City
26. City	29. City	30. City	30. City

9. Name and Address of Current Registered Agent <b>TUNKEY, WILLIAM 2250 SW THIRD AVENUE MIAMI FL 33129-2045</b>		10. Name and Address of New Registered Agent	
B1 Name		B2 Street Address (P.O. Box Number is Not Acceptable)	
B3		B4 City	
B5 FL		B6 Zip Code	

11. Pursuant to the provisions of Sections 607.02 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 607.02(4)(b), Florida Statutes.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
1. TITLE	SD	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	ROSS, ALAN	2. NAME	
3. STREET ADDRESS	2250 S W THIRD AVE	3. STREET ADDRESS	
4. CITY, ST, ZIP	MIAMI, FL 00000	4. CITY, ST, ZIP	
5. TITLE	TD	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	ROBBINS, FRED	6. NAME	
7. STREET ADDRESS	2250 S W THIRD AVE	7. STREET ADDRESS	
8. CITY, ST, ZIP	MIAMI, FL 00000	8. CITY, ST, ZIP	
9. TITLE	PD	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	TUNKEY, WILLIAM	10. NAME	
11. STREET ADDRESS	2250 S W THIRD AVE	11. STREET ADDRESS	
12. CITY, ST, ZIP	MIAMI, FL 00000	12. CITY, ST, ZIP	
13. TITLE		13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, ST, ZIP		16. CITY, ST, ZIP	
17. TITLE		17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemption stated in Section 607.02(4)(b), Florida Statutes. I further certify that the information included on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if it were made by me. I am an officer or director of the corporation or the recipient of funds 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 as an attachment with an address.

SIGNATURE: **5-8-95 3038589550**  
NAME OF SIGNING OFFICER OR DIRECTOR: \_\_\_\_\_