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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(6)

1. Corporation Name KOCH, ZELKO, ROTH, REISS, BELLANTONI, SCHINDER & ROSENBERG, P.A.



| Principal Place of                                   | of Business   | Mailing Address        |  |                               |  |                                |                      |  |
|--|---|------------------------|--|-------------------------------|--|--------------------------------|----------------------|--|
| 4700 SHERIDAN STREET<br>BLDG N<br>HOLLYWOOD FL 33021 |   | BLDG N                 | 4700 SHERIDAN STREET<br>BLDG N<br>HOLLYWOOD FL 33021 |                               | Date Incomprated or Qualified  | Date Incorporated or Qualified |                      |  |
|  |   |                        |  |                               | 07/01/1981   |                                | /30/1995             |  |
| 2. Principal Plac                                    | on of Punings   | 2a. Mailing Address    |  |                               | 4. FEI Number  |                                | Applied For          |  |
| 2. Principai Piac<br>21                              | CE OI BUSINESS  | 26                     | ,  |                               | 59-2101505   |                                | Not Applicable       |  |
| Suite, Apt. #.                                       | etc   | Suite, Apt. #, el      | C.   |                               | 5. Certificate of Status Desired   |                                | \$8.75 Additional    |  |
| 22   | , 5.5.  | 27                     |  |                               | 5. Certificate of Otation Sciences   |                                | Fee Required         |  |
| Orty & State   |   | City & State           | City & State   |                               | 6. Election Campaign Financing   |                                | <b>\$5.00</b> May Be |  |
| 23   |   | 28                     |  |                               | Trust Fund Contribution  |                                | Added to Fees        |  |
| Zip  | Country   | Ζφ                     | <b>—</b>   | untry                         | 8. This corporation has liability for Florida Statutes                                 | ir intangible tax t<br>es No   | Inder's 199.032,     |  |
| 24   | 25  | 29                     | 30   |                               | 10. Name and Address of New  |                                | ent                  |  |
|  | 9. Name and Address of Currer   | nt Hegistered Agent    |  | 81 Nar                        |  |                                |                      |  |
|  | HEROEV D  |                        |  |                               |  | abla)                          |                      |  |
|  | Jeffrey B<br>Heridan Street   |                        |  | <b>82</b> Stre                | eet Address (P.O. Box Number is Not Accept   | anai                           |                      |  |
|  | WOOD FL 33021   |                        |  | 83                            |  |                                |                      |  |
| HOLLI  | WOOD FL 53021   |                        |  |                               |  |                                | 85 Zip Code          |  |
|  |   |                        |  | 84 City                       | d corporation submits this statement for the part of dispersors. Thereby accept the at | FL                             |                      |  |
| CONTAINE   | h, and accept the obligations of. Sec<br>Signature typed or printed rame of registered appro- | t and the fluoring and | NOTE Register  |                               | ture replied wher remaining  ADDITIONS/CHANGES TO C                                    | DATE<br>FEICERS AND D          | BECTORS IN 12        |  |
| 12.  | ·   | ID DIRECTORS           | 13   | i.<br>LTITLE                  | S' D   |                                | Change Addition      |  |
| TITLE  | D<br>JACK N. ROSENBERG  | - Derei                |  | NAME                          | ROTH, MICHAEL 3<br>4700 SHEXIDAN ST<br>HOLYWOOD FL 33                                  | τ,                             | , <b>X</b>           |  |
| NAME   | 4700 SHERIDAN ST  |                        | I -  | STREET ADDRE                  | ROPH, MICHAEL C  |                                |                      |  |
| STREET ADDRESS                                       | HOLLYWOOD FL  |                        |  | C-TY-S1-7/P                   | # 160 SHELLOW 9 9L 33  | 021                            |                      |  |
| CITY-ST-ZIP<br>TITLE                                 | VD  | DELET                  |  | 1 TITLE                       |  |                                | Change               |  |
| NAME   | ZELKO, ROBERT A   |                        | 22   | NAME                          |  |                                |                      |  |
| STREET ADDRESS                                       | 4700 SHERIDAN ST  |                        | 23   | STREET ADOR                   | ESS  |                                |                      |  |
| CITY - ST - ZIP                                      | HOLLYWOOD, FL 00000   |                        | ·  | CITY-ST-ZIF                   |  |                                | Change Addition      |  |
| TITLE.   | PD  | DELET                  |  | 1 TITLE                       |  | Ц                              | ollaride 🔲 voquioti  |  |
| NAME   | KOCH, JEFFREY B   |                        |  | NAME                          | 0000   |                                |                      |  |
| STREET ADDRESS                                       | 4700 SHERIDAN ST  |                        |  | STREET ADDR                   |  |                                |                      |  |
| CITY - ST - ZIP                                      | HOLLYWOOD, FL 0   | DELE.                  |  | 1 CITY - ST - ZIF)<br>1 TiTLE |  |                                | Change Addition      |  |
| TITLE<br>NAME  | REISS, A. GERALD  |                        |  | 2 NAME                        |  |                                |                      |  |
| STREET ADDRESS                                       | 4700 SHERIDAN ST  |                        | 4.3  | 3 STREET ADDR                 | RESS   |                                |                      |  |
| CITY-ST-ZIP  | HOLLYWOOD FL  |                        | 4 6  | 4 CITY - ST - ZIP             | 3  |                                |                      |  |
| TIFLE  | D   | ☐ DELE                 | TE 5   | 1 TIFLE                       |  |                                | Change               |  |
| NAME   | BELLANTONI, DONALD, F   |                        | 5.2  | 2 NAME                        |  |                                |                      |  |
| STREET ADDRESS                                       | 4700 SHERIDAN ST  |                        |  | 3 STREET ADDE                 |  |                                |                      |  |
| CITY-ST-ZIF  | HOLLYWOOD FL  |                        |  | 4 CITY - ST - ZIF             |  |                                | Change  Addition     |  |
| TITLE  | D DEDMARD I   | ☐ DELE                 |  | 1 TITLE                       |  | L.                             | 1                    |  |
| NAME   | SCHINDER, BERNARD J   |                        |  | 2 NAME<br>3 STREET AOD        | 2930   |                                |                      |  |
| STREET ADDRESS                                       | 4700 SHERIDAN ST  |                        | 63   | 3 STREET AUD                  | uroo   |                                |                      |  |

HOLLYWOOD FL 14. If 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 cath; 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 and address.

6.4 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)