

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 29, 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

01-29-1999 90065 045 *****150.00

DOCUMENT # **F95000001482**

Corporation Name
**MANDELBAUM, SALSBURG, GOLD, LAZRIS, DISCENZA & S
 TEINBERG, P.A.**



Principal Place of Business
 155 PROSPECT AVE.
 WEST ORANGE NJ 07052

Mailing Address
 155 PROSPECT AVE.
 WEST ORANGE NJ 07052

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/28/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 22-1981178	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
STEINBERG, JEFFREY ESQ. 1489 W PALMETTO PARK RD STE 440 BOCA RATON FL 33486				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANDELBAUM, BARRY R ESQ.	1.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALSBURG, RICHARD M ESQ.	2.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	2.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLD, AVROM J ESQ.	3.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAZRIS, YALE I ESQ.	4.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	4.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEINBERG, RICHARD H ESQ.	5.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUSINBERRE, JOHN R ESQ.	6.2 NAME	
STREET ADDRESS	155 PROSPECT AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEST ORANGE NJ 07052	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] **REQUIRED** Date: 1/27/99 Daytime Phone #: 973-736-4600

CR2E034 (11/98)