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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # J51646

1. Corporation Name

(4)

THE LAW OFFICE OF JEFFREY F. BERIN, P.A.

Principal Place of Business

COMMERCE CENTER. STE 200

Maling Address

COMMERCE CENTER. STE 200 324 DATURA ST W PALM BCH FL 33401



324 DATURA ST W PALM BCH FL 33401			324 DATURA ST W PALM BCH FL 33401				3. Date Incorporated or Qualified 3. 12/31/1986	3a. Date of Last Report 05/01/1995		
2. Principal Place of Business			a. Ma'ling Address				4. FEI Number		Applied For	
1			6				59-2749392 Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Cert-ficate of Status Desired	1	75 Additional se Required	
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution	1 '	.00 May Be Ided to Fees	
Ζıρ	Country		Zip	Co	untry		8. This corporation has liability for intar	ngible tax unde	rs 199.032,	
4	25	29	l.	30			Florida Statutes 🔲 Yes 🗖 No			
	Name and Address of Cur	rent Regi	stered Agent		L		10. Name and Address of New Regis	stered Agent		
					81	Name				
Berin, Jeffrey F. 324 Datura St, Ste 200						Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
COMMERCE CENTER WEST PALM BEACH FL 33401				83						
WEST FA	ALM DENOTITE SONOT				84	City		FL 85	Zip Code	
or registere		lorida, Suc	th change was author	ized by the			ation submits this statement for the purpos d of directors. Thereby accept the appointr			

familiar with	n, and accept the obligations of, Section 6	07.0505, Florida Statutes.	·	d or directors. Thereby accept the appointment as registered agent. Fam		
SIGNATURE						
Signature typed or ported have o'registered agreed and the diagnosists 12. OFFICERS AND DIRECTORS		AND A THE RESERVE AND A SECURE AND A SECURE AND A SECURE ASSESSMENT AND A SECURE ASSESSMENT AND A SECURE ASSESSMENT ASSES	Engistered Agent signature required 13.	Figstered Aport syndrole regimed when recistaligh DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1 1 TIFLE	Change Addition		
NAMÉ	BERIN, JEFFREY F.		1.2 NAME			
STREET ADDRESS	1424 ALPHA COURT		1.3 STREET ADDRESS			
CITY-ST-ZIP	W. PALM BEACH FL		1.4 CHY-ST-ZIP			
TITLE		☐ DELEIF	2 1 TITLE	☐ Change ☐ Addition		
NAME			2.2 NAME			
STREET ADDRESS			23 STHEET ADDRESS			
CITY - ST - ZIP			2 4 C+TY - ST - ZIP			
TITLE		☐ DELETE	3 1 TITLE	Change Addition		
NAME			3.2 NAME			
STREFT ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY - \$1 - 7IP			
TITLE		DELETE	4 1 TITLE	Change Addition		
NAMÉ			4.2 NAME			
STREET ADDRESS			4.3 STHEET ADDRESS			
CITY - ST - ZIP			4.4 CITY - ST - ZIP			
THLE		DELETE	5 1 TIPLE	Change Addition		
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 C(TY - S1 - ZIP			
TITLE		□ DELETE	6 1 TITLE	☐ Change ☐ Addition		
NAME			6 2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			€ 4 CITY - ST - 7IP	or the grounding stated in Section 110.07/084 Florida Statutos Lfuther		

14. I go nereby certify that the information supplied with this filing is voluntarily turnished and 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 3 if changed, or on an attachment with an address.

SIGNATURE:

JAMES OF SERVICE OF SERVING OFFICER OR DIRECTOR

4/24/94 407-659-7228

CR2E034 (12/95)