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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # J51646 (4)

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

## **FILED** Apr 29 1997 8:00am Secretary of State



Principal Place of Business  COMMERCE CENTER, \$15-200, 324 DATURA ST  W PALM BCH FL-23401	COMMERCE CENTER, STE 200.  TOATURA ST  PALM BCH FL 33401  COMMERCE CENTER, STE 200.  TOATURA ST  W PALM BOH FL 33401 SH 4		3. Date Incorporated or Qualified 12/31/1986 34. Date of Last Report 04/29/1996		
2. Principal Prace of Business 21 ///O NORTH ULVE	Ave 25 /// Address	Olive tre.	4. FEI Number 59-2749392	<del>   </del>	pplied For ot Applicable
Suite, Apt. #, etc.	Suite. Apt. #, etc.	DAVE NO.	Certificate of Status Desired	\$8.75	Additional aguired
22 <i>W. P. D. T.</i> City & State	27 City & State	0 15	6. Election Campaign Financing	······	May Be
23	28 West Palm	Deark, P	Trust Fund Contribution	Added Added	to Fees
24 33401 25 05.	A 29 3340/ 3.	Carrier Coff	This corporation has liability to     Florida Statutes	☐ Yes X No	s. 199.032,
BERIN, JEFFREY F.	of Current Registered Agent	81 Name -	10. Name and Address of New I	registered Agent	
324 DATURA ST, STE 200			ress (P.O. Box Auraber is Not Accept	EPIN abla)	
COMMERCE CENTER			IV N. OUV	e sve.	
WEST PALM BEACH FL 334	101	83	1.1.6.	•	
		84 City	FI	85 70	Code
11. Pursuant to the provisions of Sections	s 607 0502 and 607 1508, Florida Statutes,	, the above named cor	poration submits this statement for the	purpose of changing i	ts registered
office or registered agent, or both, in agent. I am familiar with, and accept	the State of Florida, Such change was aut the obligations of, Section 607.0505, Florid	thorized by the corpora da Statutes.	tion's board of directors. I hereby acc	ept the appointment as	registered
SIGNATURE					
Signature, typed or printed name of n  12. OFFI	egistered agont and tice if applicable (NOTE: F CERS AND DIRECTORS	Registered Agent signature requ	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTOR	9S IN 12
TITLE D	DELETE	1.1 TITLE	ADDITIONO/OFFANGES TO CIT	Change	Addition
NAME BERIN, JEFFREY F.	_	12 NAME		-	Addition
STREET ADDRESS 4424 ALPHA COURT-	-2066 CEZANNE RD	1,3 STREET ADDRESS			
CITY-ST-ZIP W: PALM BEACH FL	W.P.B. Fl 33409	1.4 CITY-ST-ZIP			
THE	☐ DELETÉ	2.1 TITLE		Change	Addition
NAME		2 2 NAME			
STREET ADDRESS		2 3 STREET ADDRESS	,		
CITY: \$1-ZIP	POLITE	2.4 CITY-ST-ZIP		[ ] Observe	- Addition
TILLE	DELETE	3.1 TITLE		☐ Change	Addition
NAME		3.2 NAME		·	
STREET ADDRESS		3.3 STREET ADDRESS			
City-St-7iP	DELETE	3.4. CITY-ST-ZIP		Change	Addition
TITLE	E becut	4.1 TITLE		C change	L_J ABBROOM
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			i
CHY-SI-ZIP TITLE	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change	Addition
NAME	_ been	5.2 NAME		hand transfer	
STREET ADDRESS		5.3 STREET ADDRESS			
CORY-ST-ZIP		5.4 CITY-ST-ZIP			ļ
TILLE	DELETE	6.1 TITLE		Change	Addition
NAME	hand process	6.2 NAME			
STHEFT ADDRESS					į
		6.3 STREET ADDRESS	•		
14. I do hereby certify that the information	or supplied with this filing does not quality	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i). Florida Statu	ites. I further certify the	t 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 hanged or on an attachment with an appliass.

SIGNATURE: