

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

12

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**

97 JUL 23 AM 11:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # M41440 (2)**

1. Corporation Name  
**BLAXBERG, GRAYSON & SINGER, P.A.**



Principal Place of Business <b>C/O SEYMOUR N. SINGER 25 SE 2ND AVE., STE. 730 MIAMI FL 33131-8506</b>	Mailing Address <b>C/O SEYMOUR N. SINGER 25 SE 2ND AVE., STE. 730 MIAMI FL 33131-8506</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

3. Date Incorporated or Qualified <b>11/12/1986</b>	3a. Date of Last Report <b>02/05/1996</b>
4. FEI Number <b>59-2737697</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BLAXBERG, I. BARRY  
25 S.E. 2ND AVENUE  
STE.730-INGRAHAM BLDG.  
MIAMI FL 33131-8506**

10. Name and Address of New Registered Agent

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 re-registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>BLAXBERG, I. BARRY</b>	
STREET ADDRESS	<b>25 SE 2 AVE., STE.730</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	<b>VPS</b>	<input type="checkbox"/> DELETE
NAME	<b>GRAYSON, MOISES T.</b>	
STREET ADDRESS	<b>25 SE 2 AVE., STE.730</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	<b>TVP</b>	<input type="checkbox"/> DELETE
NAME	<b>SINGER, SEYMOUR N.</b>	
STREET ADDRESS	<b>25 SE 2 AVE., STE.730</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

**700002251207--6**  
**-07/29/97--01089--024**  
**\*\*\*\*173.75 \*\*\*\*173.75**

14. I do 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

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

CR2E034 (4/97)

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LAW OFFICES  
**BLAXBERG, GRAYSON & SINGER, P.A.**  
SUITE 730 - INGRAHAM BUILDING  
25 SOUTHEAST 2ND AVENUE  
MIAMI, FLORIDA 33131-1506  
TELEPHONE (305) 381-7979  
TELECOPY: (305) 371-6816

I. BARRY BLAXBERG  
MOISES T. GRAYSON  
SEYMOUR N. SINGER

IAN J. KUKOFF  
JONATHAN W. SEGAL  
DANIEL J. SERBER

Writer's Direct Line: 381-7979 Extension

July 17, 1997

Division of Corporations  
Annual Report Section  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: 1997 Annual Report - Document No.: M41440

To Whom it may concern:

As per instructions given by the Department of State phone assistance line (904)488-9000, we have prepared this letter.

Enclosed you will find check #4776 for the amount of \$173.75 and a completed second notice Annual Report form. This is to replace check #3862 dated 1/3/97 for the same amount, which may have been lost in the mail. Check #3862 has never been cashed. Also enclosed is a copy of the form filed on 1/3/97 and a copy of the original check.

If you have any questions, please call.

Very truly yours,



Seymour N. Singer

TCK: 8/15/97  
CC: Acct.