

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mathias

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # M45361

(6)

1. Corporation Name

GREENWALD & GLAUSER, P.A.



Principal Place of Business

10840 SW 113 PLACE
MIAMI FL 33176
US

Mailing Address

12910 SW 84TH ST
MIAMI FL 33183
US

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

g. Name and Address of Current Registered Agent

GLAUSER, STUART H.
12910 SW 84 STREET
MIAMI FL 33183

3. Date Incorporated or Qualified

01/23/1987

3a. Date of Last Report

03/23/1995

4. F.I. Number

59-2770763

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation is liable for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 602.0502 and 602.0503, 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 is 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 602.0505, Florida Statutes.

SIGNATURE

Signature of the individual who is the registered agent of the corporation.

Signature of the individual who is the registered agent of the corporation.

Signature

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1. TITLE

D

☐ DELETE

NAME

GLAUSER, STUART H.
12910 SW 84TH STREET
MIAMI FL

STREET ADDRESS

CITY, ST, ZIP

2. TITLE

D

☐ DELETE

NAME

GREENWALD, DANIEL
12910 SW 84 ST
MIAMI FL

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this report is true and correct, to the best of my knowledge and belief, 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 registered agent, and that I am empowered to execute this report as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an additional page as a new addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STUART H. GLAUSER

3/25/96 (305) 271-6600

CR2E034 (12/95)