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 # P93000013356 (9) ADVOKATZ PLUS, INC.

FILED Jan 27 1997 8:00am Secretary of State

	1480 141	atin film ti	(()	ANKOR IKADA DALIA DINI I	H

2. Principal Place of Business 22. Mailling Address 4. FEI humber 65-0395527 Applied for 500 Application 500	Principal Place 4500 BISCAYN SUITE 325 MIAMI FL 3313	E BLVD.	Mailing Address 4500 BISCAYNE BI SUITE 325 MIAMI FL 33137-32							
22, Principal Pictic of Business 28, Malaring Address 4, FEI Number 56-0385527 Applied For										
Suite Apr. # etc 2 21 22 27 5. Conflicate of Status Desired \$8.75 Additional Fee Required Fee Required \$27 \$3.0	2. Principal P	lace of Business	<u> </u>	ss		4, FEI Number		Ар		
Added to Fees Addition Ad		#, etc	27	etc.		5. Certificate of Status Desired		•		
Section Sect	23		28	<u>.</u>	, , , , , <u>, , , , , , , , , , , , , , </u>	Trust Fund Contribution		Added t	o Fees	
BERNSTEIN, MARK 8100 HOLLYWOOD BLVD., \$404 HOLLYWOOD FL 33024 ### City Fire S. Katz Street Adjess; (P. Q. Box Number is Not Appendable)			——————————————————————————————————————		ntry				199.032,	
STREET ADDRESS OCHY-ST-2P TITLE				[30]						
## 100 HOLLYWOOD BLVD., #404 HOLLYWOOD FL 33024 ## 2 Street Address (P.O. Box Number is Not Acceptable) ## 4500 B1scayne B1vd. ## 2 City Miami	BER	INSTEIN, MARK			81 Name C	nic C Vatz				
Suite 325	610	O HOLLYWOOD BLVD., #404					ble)			
11. Prosecute to the provisions of Sockons 607 0502 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent and furnished with, and social the obligations of, Social Roof 05055, Floridal Statutes. SIGNATURE	Hot	TIMOOD LE 20054			83 S	uite 325				
11. Prosecute to the provisions of Sockons 607 0502 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent and furnished with, and social the obligations of, Social Roof 05055, Floridal Statutes. SIGNATURE								85 Zip (Çode.	
agent I am furnishativity. And a color if the objections of Socion 607 0056; horizon statutes SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. OFFICERS AND DIRECTORS IN 12 TITLE P. OFFICERS AND DIRECTORS 15. ITITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ITITLE ADDITIONS/CHANGES T		607	0F00	- Cintutae the el						
12.	office or r agent La	to the provisions of Sections 607.1 egistered agent or both) in the Si im familia, with, and account the of	usuz and 607,1508, Florid late of Florida. Such chang bigations of, Section 607.0	a Statutes, the at je was authorize 505, Florida Stat	bove-named corporal d by the corporal utes.	tion's board of directors. I hereby acce	pt the appoir	ntment as	registered	
12.	SIGNATURE.	- C-11X			1 Agent signature requi	red when (sinsistum)		<u>/97</u>		
TITLE	12.	The state of the s			a agont a grattare vaqui	· · · · · · · · · · · · · · · · · · ·		IRECTOR	S IN 12	
13 STREET ADDRESS		7	DEt	.ETE 1.1 TI	TLE			Change	Addition	
Title	NAME			1.2 N	AME .					
TITLE	STREET ADDRESS				Y		•			
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 31 TITLE 32 NAME 32 NAME STREET ADDRESS CITY-ST-ZIP TITLE ANAME STREET ADDRESS CITY-ST-ZIP Addition NAME ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP TITLE DELETE AL CITY-ST-ZIP AL CITY-ST-ZIP TITLE AL CITY-ST-ZIP TITLE DELETE AL CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-Z	····	MINMI FL	I DEI				-	Channe	Addition	
23 STREET ADDRESS 24 CITY-ST-ZIP							h	g Crango	, addition	
CITY - ST - ZIP	ļ									
NAME				2.40	ITY-ST-ZIP					
STREET ADDRESS	TITLE		☐ DEI	ETE 31TI	TLE			Change	☐ Addition	
STREET ADDRESS STRE	NAME				l					
TILLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME				1	* *					
NAME			DFI					Change	Addition	
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP)			1	• 1		•			
TITLE DELETE 5.1 YITLE Change Addition NAME 52 NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS STREET ADDRESS STREET ADDRESS										
STREET ADDRESS	CITY - ST - ZIP				TY-ST-ZIP					
STREET ADDRESS	TITLE		☐ DE	.ETE 5.1 TO	TLE		Ţ	Change	Addition	
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS Change Addition	1				1					
TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS	\			N.						
NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS			Ппс				Т	Change	Addition	
STREET ADDRESS 63 STREET ADDRESS	ľ		L., UC	1				T District	FAGURON	
	1									
	DITY-ST-ZIP				1					

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 of 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 arachment with an address.

SIGNATURE:

Eric S Katz SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

1/15/97

Date