

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER M. MATHIAS
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V17170

(4)

1. Corporation Name

GRUBER AND ASSOCIATES, P.A.

95 FEB -7 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700001402487

-02/09/95--01133--002

****400.00 ****200.00

Principal Place of Business

1650 S.E. 17TH ST.
STE. #301

FORT LAUDERDALE FL 33316-1735

Mailing Address

1650 S.E. 17TH ST.
STE. #301

FORT LAUDERDALE FL 33316-1735

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/26/1992

3a. Date of Last Report

01/21/1994

2. Principal Place of Business

21 1650 Southeast 17th Street

2a. Mailing Address

26 1650 Southeast 17th Street

Suite, Apt. #, etc.

22 SUITE 301

Suite, Apt. #, etc.

27 SUITE 301

City & State

City & State

24

Zip 33316-1735

Country

25

Zip 33316-1735

Country

4. FEI Number

65-0312161

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GRUBER, RICHARD C. ^{Safe}
1650 SOUTHEAST 17TH ST., STE 301
FORT LAUDERDALE FL 33316-1735

10. Name and Address of New Registered Agent

81 Name

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

1650 Southeast 17th Street, Suite 301

83

84 City

FL

85

Zip Code 33316-1735

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

Signature, typed or printed name of registered agent and the if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME GRUBER, RICHARD C.
STREET ADDRESS 1650 SOUTHEAST, 17TH STREET, STE 301
CITY-ST-ZIP FORT LAUDERDALE FL 33316-1735

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP FORT LAUDERDALE, FLORIDA 33316-1735

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.07(3)(a), 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:

RICHARD C. GRUBER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard C. Gruber 1/9/94 305-522-2222