

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -6 AM 9:30

DOCUMENT # P94000028273 (8)

1. Corporation Name

GEIGER, KASDIN, HELLER & KUPERSTEIN, P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Physical Place of Business

1110 BRICKELL AVE.
7TH FLOOR
MIAMI FL 33131

Mailing Address

1110 BRICKELL AVE.
7TH FLOOR
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/13/1994

3a. Date of Last Report

4. FEI Number

05-0488358

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

2. Principal Place of Business

21 1428 Brickell AVE

2a. Mailing Address

26 1428 Brickell AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 600

27 Suite 600

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip Country

Zip Country

24 33131

29 33131

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEIGER, ROBERT S
1110 BRICKELL AVE.
7TH FLOOR
MIAMI FL 33131

81 Name

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

1428 Brickell AVE

83 Suite 600

84 City
Miami

FL

85 Zip Code
33131

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]

(NOTE: Registered Agent's signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

11 NAME
P Robert S. Geiger
12 STREET ADDRESS
1428 Brickell AVE, Suite 600
13 CITY, ST, ZIP
Miami, FL 33131

14 NAME
V JONATHAN HELLER
15 STREET ADDRESS
1428 Brickell AVE, Suite 600
16 CITY, ST, ZIP
Miami, FL 33131

17 NAME
3 STANLEY H. KUPERSTEIN
18 STREET ADDRESS
1428 Brickell AVE, Suite 600
19 CITY, ST, ZIP
Miami, FL 33131

20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP

23 NAME
24 STREET ADDRESS
25 CITY, ST, ZIP

26 NAME
27 STREET ADDRESS
28 CITY, ST, ZIP

29 NAME
30 STREET ADDRESS
31 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS

34 CITY, ST, ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law, 190 (37)(19), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the holder of a position empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on block 1, or block 1a if changed, or on an attachment with an address.

SIGNATURE: V

WHAT CALL AND TYPE OR PRINTED NAME OF BRIDING OFFICER OR DIRECTOR

STANLEY H. KUPERSTEIN