

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S15038 (0)

1. Corporation Name

YOUNG, BERKMAN, BERMAN & KARPF, P.A.



Principal Place of Business

Mailing Address

17071 WEST DIXIE HIGHWAY
N MIAMI BEACH FL 33160

17071 WEST DIXIE HIGHWAY
N MIAMI BEACH FL 33160

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified

11/28/1990

3a. Date of Last Report

01/20/1995

4. FEI Number

65-0232666

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

10. Name and Address of New Registered Agent

YOUNG, BURTON
17071 WEST DIXIE HIGHWAY
N MIAMI BEACH FL 33160

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 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 of the person named as registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☒ Change ☐ Addition

NAME YOUNG, BURTON
STREET ADDRESS 3900 ISLAND BLVD. B-307
CITY-ST-ZIP NORTH MIAMI BEACH FL

12 NAME
13 STREET ADDRESS 17071 W. DIXIE Hwy
14 CITY-ST-ZIP NMB, FL 33160

TITLE ☐ DELETE

2.1 TITLE ☒ Change ☐ Addition

NAME BERMAN, ANDREWS S.
STREET ADDRESS 15040 SW 75 CT.
CITY-ST-ZIP MIAMI FL

22 NAME
23 STREET ADDRESS 17071 W. Dixie Hwy
24 CITY-ST-ZIP NMB, FL 33160

TITLE ☐ DELETE

3.1 TITLE ☒ Change ☐ Addition

NAME KARPF, MITCHELL
STREET ADDRESS 16322 NW 5 ST
CITY-ST-ZIP PEMBROKE PINES FL

32 NAME
33 STREET ADDRESS 17071 W. Dixie Hwy
34 CITY-ST-ZIP NMB, FL 33160

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

62 NAME
63 STREET ADDRESS
64 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 119.07(3)(k), 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-96

3059451851

CR2E034 (12/95)