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Feb 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 677324 (6)

1. Corporation Name  
FREUND, FISHER, GOLDSTON & COMPANY, P.A.

Principal Place of Business  
3111 UNIVERSITY DR  
STE 720  
CORAL SPRINGS FL 33065  
US

Mailing Address  
3111 UNIVERSITY DR  
STE 720  
CORAL SPRINGS FL 33065-5088  
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

FISHER, LAWRENCE  
210 UNIVERSITY DR., STE.#301  
FT LAUDERDALE, FL  
CORAL SPRINGS FL 33071

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the agent 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 applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	DELETE
NAME	FISHER, LAWRENCE	
STREET ADDRESS	3111 UNIVERSITY DR, STE 720	
CITY - ST - ZIP	CORAL SPRINGS FL	
TITLE	P	DELETE
NAME	FREUND, IRWIN B	
STREET ADDRESS	3111 UNIVERSITY DR, STE 720	
CITY - ST - ZIP	CORAL SPRINGS FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97 (305) 274-1288

CR2E034 (9/96)