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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sindra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 523291

(3)

REINMAN, INC.

FILED May 16 1997 8:00am Secretary of State

Principal Place	of Business	Mailing Address								
1923 N.E. 150T NORTH MIAMI		Suite, Apt. #, etc. City & State								
2. Principal Pla	ace of Business)ı	Mailing Address	Dark.			1 **			
21 / 4 3	ABOUE			9 0 020			59-17 15333			
Suite, Apt. i	#, etc.	F3	Suite, Apt. #, etc.				5. Certificate of Status Desired			
22 City & State			City P State							
23	•	├ ¬	City & State					\Box		
Zip Country						.,				
24	26	F	•	├ ٦	•					
			ered Agent				10. Name and Address of New Re	gistered /	\gent	
· REIN	IMAN, V. BRICE				81	Name				
	3 NE 150 ST.				82	Street Add	Iress (P.O. Box Number is Not Acceptate	le)	- · · · · · · · · · · · · · · · · · · ·	,. ,
MIAI	MI FL 33181									,
^					83					
					84	City		·	85 Z	ip Code
		·							1 1	
11. Pursuant t	to the provisions of Sections 607.0502	and 60 of Florid	07.1508, Florida Sta Ia. Such change wa	itutes, the ab as authorized	oove d by	o-named cor r the corpora	poration submits this statement for the patients board of directors. Thereby accept	urpose of of the app	changing ointment	g its registered as registered
agent. I ar			, Section 697.0505,	Florida Ştat	uloś	S. '	·	1/2	100	,
SIGNATURE .	i vred	e		una	_				19/	
12.				and the same of the same	ı Mile	n. signastiid rede		ERS AND	DIRECT	ORS IN 12
TITLE	P				ILF					
NAME	REINMAN, V. BRICE			12 N/	ME					
STREET ADDRESS	2421 NE 187TH STREET			13 51	REET	ADDRESS				
CITY-ST-ZIP	MIAMI FL			1,4 CI	TY-S	51 - Z(P				
TALE	ST		☐ DELFTE	2.1 11	1LE				Chang	e Addition
NAME	reinman, Kathleen F.			2,2 N	AME					
STREET ADDRESS	2421 NE 187TH STREET			2,3 51	TRLE T	ADDRESS				
CITY-ST-ZIP	MIAMI FL		and the second second second			ST - 7/P			TT 0	T3
TITLE	V		L_J DEILTE			1				e L_3 Addition
NAME	REINMAN, MICHAEL J. 9540 SW 7TH ST.			3,2 N						
STREET ADDRESS	PEMBROKE PINES FL					ADDRESS				
CITY-ST-ZIP	V FINDROVE FINES FL		DELETE	3,4. C		ST-ZIP			Chang	e Addition
TITLE NAME	REINMAN, DANIEL J.		i pittit	4.2 N						,
STREET ADDRESS	1131 NORTH 70 TERRACE					ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL					61 - 7/P				
TITLE	11000110		DELETE	511					Chang	ge Addition
NAME				5.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			DELETE	6,1 TI					Chang	ge 🔲 Addition
NAME				62 N	4ME					
STREET ADDRESS				6,3 S	TREFT	ADDRESS				
CITY-ST-ZIP				64 C	NY-9	ST-ZIP				
14. I do herel	by certify that the information supplied	t with th	nis filing does not q	ualify for the	οхє	emption state	ed in Section 119.07(3)(i), Florida Statute	s. I furtho	r certify th	nat 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 oat 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or any in attachment with an address.