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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 534521

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Principal Place of Business Mailing Address 2140 S. DIXIE HIGHWAY 2140 S. DIXIE HIGHWAY MIAMI FL 33133 MIAMI FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 04/07/1977 05/01/1995 2. Principal Place of Business FEI Number 2a. Mailing Address Applied For 21 59-1738777 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired  $\Box$ 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zφ Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes X No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLDBERG, MICHAEL C. 82 Street Address (P.O. Box Number is Not Acceptable) 8555 PONCE DE LEON RD. 83 MIAMI FL 33143 84 City 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 typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1. 1 TITLE Change Addition GOLDBERG, MICHAEL C. PICK, EDWARD NAME 1.2 NAME STREET ADDRESS 8555 PONCE DE LEON RD. 2417 N. GREENWAY DR 1.3 STREET ADDRESS MIAMI, FL 00000 CORAL GABLES, FL 33134 CITY-ST-ZIP 1.4 CITY-S1-ZIP TITLE VΡ DELETE 2.1 TITLE ☐ Change 🔀 Addition PRICE, BEVERLY 5600 SW 95 ST. MURO, KATHLEEN NAME 2.2 NAME 407 S.E. 7 ST. STREET ADDRESS 2.3 STREET ADDRESS DANIA FL MIAMI, FL 33156 CITY-ST-ZIP 24 CHY-ST-ZIP STD DELETE TITLE ☐ Change 3 1 THILE Addition ALVAREZ, CESAR 1221 BRICKELL AVE, 22 ND FLOOR GOLDBERG, CINDY L NAME 3.2 NAME 8555 PONCE DE LEON RD. STREET ADDRESS 3.3. STREET ADDRESS MIAMI FL CHTY-ST-ZIP MIBMI, FL 33131 34 CITY-ST-ZIP DELETE TITLE 4 1 TITLE Addition STROUD, CHRISTINE NAME NIERENBERG, BRUCE 4.2 NAME 7420 SW 162ND ST 774 GLENGARRY DR. MELBOURNE, FL 32940 STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CHY-ST-ZIP DELETE TITLE 5 1 TITLE Change X Addition NAME KENNEDY.DOUGLAS SCHIFF, ALBERT J. 5.2 NAME 10 TH FLOOR 12940 CORONOADO TERR. STREET ADDRESS 5.3 STREET ADDRESS 263 TRESSER BWD N MIAMI FL CITY-ST-ZIP 5 4 CITY - \$1 - ZIP STAMFORD, CT

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 trusted 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 all achiment with an address.

6 1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6 4 CITY - S1 - ZIP

SIGNATURE:

FLEISCHMAN, RICHARD

SOUTHBORO MA

75 BREAKNECK HILL ROAD

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TURE AND TYPED OR PHILITED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/30/96

Daytime Phone #

☐ Change

■ Addition

CR2E034 (12/95)