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

582030 **DOCUMENT #** 1. Corporation Name

(3)

FIRST	MIAMI SECURITIES, INC.				 		#
Principal Place of Business Mailing Address				•			
20600 W. DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180		20660 W. DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180					
					3. Date Incorporated or Qualified 08/11/1978	3a . D	ate of Last Report 05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address			4. FET Namiber 59-1842344		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		39-1042344		Not Applicable	
22		27		5. Certificate of Status Desired	X	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing		\$5.00 May Be	
23		28			Trust Fund Contribution		Added to Fees
<i>Z</i> ip	├ ─┐ '		Country		8. This corporation has liability for	intang/ble	tax under s. 199.032,
24	25	29	30			i □ No	
	9. Name and Address of Currer	nt Registered Agent	8	1 Name	10. Name and Address of New	Registere	d Agent
HHODI	ALL ANTONIO O		°	i Name			
MAIORANA, ANTONIO S. 3321 NORTH 34TH STREET			8	2 Street Addr	ress (P.O. Box Number is Not Accepta	bio)	
	VOOD FL 33021						
HOLLIT	100D FL 53021						
			8	4 City		F	85 Zip Code
signature	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect Sgnature, byted or prince transcribed series agent	lion 607.0505, Florida Statute	S.	poration's boar entagration regime	ration submits this statement for the pured of directors. Thereby accept the app	pate	as registered agent. I am
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OF		ND DIRECTORS IN 12
TITLE	PD	☐] DELFIE	1 1 1 1 1 1 1				Change Addition
NAME	KLOTZ, JAMES A.		1.2 NAM5				
STREET ADDRESS	20660 W. DIXIE HIGHWAY		1.3 STRE	EL ADDRESS			
CHTY-ST-ZIP	MIAMI FL		1.4 CITY	-S1 - 71P			
TITLE	C	DELETE	2 1 1/11/				Change Addition
NAME	FEINSILVER, PAUL		2.2 NAM6				
STREFT ADDRESS	2131 N.E. 211TH STREET		2 3 S1R8	RZBRCDA FE			
CITY - ST - ZIP	N. MIAMI BEACH FL	FO DELET	2.4 0114				
THILE		□ DELFTE	3 1 111116				Change Addition
NAM:			3.2 NAME				
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS			
TULE		DELFIE	3.4 CHY- 4.1 HILE		-		Change Addition
NAME			4.2 NAME				☐ Out tigle ☐ Madulter
STREET ADDRESS				T ANDRESS			
CITY-ST-ZIP			4.4 C41Y				
TITLE		DELFTE	5 1 3/10				Change Addition
NAME			5.2 NAME				
STREET ADDRESS				LADDRESS			1
CITY - ST - ZIP			5 4 CI1Y -	!			
TITLE		☐ DELETE	6 1 TITLE	1			☐ Change ☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STREE	1 ADDRESS			
CITY-ST-ZIP			64 CITY -	ST-ZIP			

14. Ido 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 procedure surface 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: NAME OF FIGNING OFFICER OR DIRECTOR 3/20/96

(305) 937-0660

FILED

Secretary of State

Mar 27 1996 8:00 am