

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 601341 (1)

1. Corporation Name:

GREEN, KAHN & PIOTRKOWSKI, P.A.



Principal Place of Business

Mailing Address

627 - 71ST STREET
MIAMI BEACH FL 33141

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MIAMI BEACH FL 33141

3. Date Incorporated or Qualified

08/29/1969

3a. Date of Last Report

04/28/1995

4. FEI Number

59-1270458

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. 193.032
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 317-71st STREET

Suite, Apt #, etc.

22 City & State

23 Miami Beach FL

Zip

33141

Country

DADE

25

9. Name and Address of Current Registered Agent

GREEN, MARVIN M

627 71 ST

MIAMI BEACH FL 33141

2a. Mailing Address

26 SAME

27 City & State

28

29

30

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

317-71st STREET

83

84 City Miami Beach

FL

85 Zip Code

33141

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 the person designated and the applicable

(NOTE: If a corporation, the signature required when re-registering)

(NOTE: If a corporation, the signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD GREEN, MARVIN M.

STREET ADDRESS 627 71ST STREET

CITY- ST- ZIP MIAMI BCH FL

TITLE ☐ DELETE

NAME SOT KAHN, DONALD J.

STREET ADDRESS 627 71ST STREET

CITY- ST- ZIP MIAMI BCH FL

TITLE ☐ DELETE

NAME TD PIOTRKOWSKI, JOEL S

STREET ADDRESS 627 71ST STREET

CITY- ST- ZIP MIAMI BCH FL

TITLE ☒ DELETE

NAME S MILLER, ROBERT B

STREET ADDRESS 627 71ST STREET

CITY- ST- ZIP MIAMI BEACH FL

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 617, 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

6-10-96

305-865-4211

CR2E034 (3/96)