

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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97 APR 17 PM 2:23

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 601352 (8)
 1. Corporation Name
**GREENBERG TRAUIG HOFFMAN LIPOFF ROSEN & QUENTEL
 , P.A.**

Principal Place of Business	Mailing Address
C/O FRANCES M. WYLDE 1221 BRICKELL AVENUE MIAMI FL 33131	C/O FRANCES M. WYLDE 1221 BRICKELL AVENUE MIAMI FL 33131-3224

3. Date Incorporated or Qualified 09/02/1969	3a. Date of Last Report 02/06/1996
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2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1270754		Applied For ☐ Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24 Country		29 Country					
25		30					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GARRETT, RICHARD G 1221 BRICKELL AVENUE MIAMI FL 33131				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO ☐ DELETE	1.1 TITLE	C/D ☒ Change ☐ Addition
NAME	HOFFMAN, LARRY J	1.2 NAME	Hoffman, Larry J.
STREET ADDRESS	3525 BAYSHORE VILLAS DR	1.3 STREET ADDRESS	3525 Bayshore Villas Dr.
CITY, ST, ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	TRAUIG, ROBERT H	2.2 NAME	700002146347--9
STREET ADDRESS	130 SOLANO PRADO	2.3 STREET ADDRESS	-04/17/97--01046--007
CITY, ST, ZIP	CORAL GABLES FL	2.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	ROSEN, MARVIN	3.2 NAME	
STREET ADDRESS	7195 BAHIA VISTA BLVD	3.3 STREET ADDRESS	
CITY, ST, ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	S ☒ DELETE	4.1 TITLE	S/D ☒ Change ☐ Addition
NAME	QUENTEL, ALBERT D.	4.2 NAME	Kalby, Martin
STREET ADDRESS	3410 POINCIANA AVE.	4.3 STREET ADDRESS	1221 Brickell Avenue
CITY, ST, ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33131
TITLE	VP ☐ DELETE	5.1 TITLE	P/D ☒ Change ☐ Addition
NAME	ALVAREZ, CESAR L.	5.2 NAME	Alvarez, Cesar L.
STREET ADDRESS	1221 BRICKELL AVENUE	5.3 STREET ADDRESS	1221 Brickell Avenue
CITY, ST, ZIP	MIAMI FL 33131	5.4 CITY-ST-ZIP	Miami, FL 33131
TITLE	VP ☐ DELETE	6.1 TITLE	V/T/D ☒ Change ☐ Addition
NAME	GORSON, MATTHEW B	6.2 NAME	Gorson, Matthew B.
STREET ADDRESS	1221 BRICKELL AVENUE	6.3 STREET ADDRESS	1221 Brickell Avenue
CITY, ST, ZIP	MIAMI FL 33131	6.4 CITY-ST-ZIP	Miami, FL 33131

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: *Cesar L. Alvarez, President* **4/16/97** **305-579-0668**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/96)