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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

601380 DOCUMENT #

(9)

	robin, zwibel & Aptman,	P.A.						
Principal Place	of Business	Mailing Address					11911 H	#1#11 #1#11 1 0 #1
8950 N KENDALL DR #501 8950 N KENDALL DR : MIAMI FL 33176 MIAMI FL 33176			F501					
					3. Date Incorporated or Qualified 09/11/1969	3a. Date of 03/	Last Re 16/199	•
2. Principal Pla	ace of Business	2a. Mairing Address			4. FEI Number			applied For
1		26		,	59-1273902			Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			Certificate of Status Desired			Additional Required
City & State	<u> </u>	City & Stale			6. Election Campaign Financing			May Be
3	•	28			Trust Fund Contribution			May be I to Fees
Zip	Country	7 ₁ p	Cou	ntry	8. This corporation has liability for	intangible tax u		
4	25	29	30		Florida Statutes Yes	□No		
	9. Name and Address of Current				10. Name and Address of New F	legistered Ag	ent	
				81 Name				
TOBIN,V	WAYNE E , M.D.		ļ	82 Street Add	ress (P.O. Box Number is Not Acceptate	oie)		
8950 N KENDALL DR #501								
MIAMI F	FL 33176			83				
				84 City			85 Zyp	Code
	to the provisions of Sections 607.0502 a	of President		1		FL		
SIGNATURE	to the provisions of Sections 607.0902 a cet agent, or both, in the State of Florida th, and eccept the obligations of, Section (Compared to the Section Section Section).	olius a tre taggiodale — (NO		Agent signature requir		DATE	<u> </u>	/6
TITLE	VD	DELETE	1.11	TLE			Change	Addition
NAME	. •					لــا	Спанув	Manition.
	I APTMAN, MICHAEL		12%	ME.		Ш	Change	☐ Madition
STREET ADDRESS	APTMAN, MICHAEL 8950 N KENDALL DR #501			ME BEFT ADDRESS		LJ	Стапуе	☐ Addition
	8950 N KENDALL DR #501		138			LJ	Change	☐ Madition
CITY-ST-ZIP	•	DELETE	138	REFT ADDRESS 1Y-ST-ZIP			Change	Addition
CITY-ST-ZIP TITLE	8950 N KENDALL DR #501 MIAMI, FL 00000	☐ DELEIE	1.3 S 1.4 C	REFT ADORESS TY-ST-ZIP TLE	,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
CHY-ST-ZIP TITLE NAME	8950 N KENDALL DR #501 MIAMI, FL 00000 STD	□ DELETE	13S 1.4C 2 1 T 22 N	REFT ADORESS TY-ST-ZIP TLE				
CHY-ST-ZIP TITLE NAME	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L		1.3 S 1.4 C 2 1 T 2 2 N 2 3 S	REFT ADDRESS 1Y-ST-ZIP TLE ME			Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD	☐ DELETE	1.3 S 1.4 C 2 1 T 2 2 N 2 3 S	HEFT ADDRESS IY-ST-ZIP TLE MME REST ADDRESS TY-ST-ZIP				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E		13S 14C 2 1 T 22 N 23 S 24 C	REFT ADDRESS 1Y-ST-ZIP TLE MME REST ADDRESS TY-ST-ZIP TLE			Change	Addition
CHY-ST-ZIP TITLE NAME STREEFF ADDRESS CHY-ST-ZIP TITLE	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501		13 S 1.4 Cl 2 1 T 2 2 N 2 3 S 2 4 C 3 1 T 3 2 N 3 3 S	REFT ADDRESS 1Y - ST- ZIP TLE ME REST ADDRESS TY - ST- ZIP TLE MME REST ADDRESS LIFERT ADDRESS			Change	Addition
CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501 MIAMI, FL 00000	□ DELETE	13 S 1.4 Cl 2 1 T 2 2 N 2 3 S 2 4 C 3 1 T 3 2 N 3 3 S 3 4 C	REFT ADDRESS 1Y-S1-ZIP TLE MME REST ADDRESS TY-S1-ZIP TLE MME IREET ADDRESS TY-S1-ZIP IREET ADDRESS TY-S1-ZIP			Change Change	Addition
CHY-ST-ZIP TITLE NAME SPRET I ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501 MIAMI, FL 00000 V		13 S 14 C 2 1 T 2 2 N 2 3 S 2 4 C 3 1 T 3 2 N 3 3 S 3 4 C 4 1 T	REFLADDRESS 1Y-S1-ZIP TLE MME RESTADDRESS TY-S1-ZIP TLE MME IREETADDRESS TY-S1-ZIP TILE THEETADDRESS TY-S1-ZIP TILE			Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501 MIAMI, FL 00000 V WHEELER, STEVE D 8950 N. KENDALL DR. #501	□ DELETE	13S 14Cl 21T 22N 23S 24C 31T 32N 33S 34C 41T 42N	REFI ADDRESS 1Y-ST-ZIP TLE WME REST ADDRESS TY-ST-ZIP TILE MMC IREET ADDRESS TY-ST-ZIP TILE MMC IREET ADDRESS TY-ST-ZIP TILE MME REFI ADDRESS			Change Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501 MIAMI, FL 00000 V WHEELER, STEVE D	☐ DELETE	13S 14C 21T 22N 23S 24C 31T 32N 33S 34C 41T 42N 43S	REFLADDRESS 1Y-ST-ZIP TLE MRE RESTADDRESS TY-ST-ZIP TILE MME IREET ADDRESS TY-ST-ZIP FILE AME REFT ADDRESS TY-ST-ZIP			Change Change Change	Addition Addition
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CHY-ST-ZIP TITLE NAME STHEF FADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	8950 N KENDALL DR #501 MIAMI, FL 00000 STD ZWIBEL, HOWARD L 8950 N KENDALL DR #501 MIAMI, FL 00000 PD TOBIN, WAYNE E 8950 N KENDALL DR #501 MIAMI, FL 00000 V WHEELER, STEVE D 8950 N. KENDALL DR. #501 MIAMI FL V CARRAZANA, ENRIQUE J 8950 N. KENDALL DR. #501	☐ DELETE	13S 14C 21T 22N 23S 24C 31T 32N 33S 34C 41T 42N 43S 44C 511 52N 53S	REFLADDRESS TY-ST-ZIP TLE MME RESTADDRESS TY-ST-ZIP GLE MME IRESTADDRESS TY-ST-ZIP FREETADDRESS TY-ST-ZIP GRETADDRESS TY-ST-ZIP GRETADDRESS TY-ST-ZIP GRETADDRESS TY-ST-ZIP GRETADDRESS TY-ST-ZIP GRETADDRESS TY-ST-ZIP GRETADDRESS			Change Change Change	Addition Addition
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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 60?, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR