FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

'95 MAR -6 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 602354 (3)

1. Corporation Name

PREDDY, KUTNER, HARDY, RUBINOFF, BROWN & THOMPSON, P.A.

Principal Place of Business	Mailing Address
501 NE 1ST AVENUE MIAMI FL 33132	501 NE 1ST AVENUE MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/25/1970	3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-1301010	☐ 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. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

9. Name and Address of Current Registered Agent

KUTNER, ARNO
501 NE 1ST AVE.
MIAMI FL 33132

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 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: ARNO KUTNER (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	KUTNER, ARNO	12 NAME		
STREET ADDRESS	13400 S.W. 66TH AVENUE	13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP		
TITLE	VPD	21 TITLE		☐ Change ☐ Addition
NAME	HARDY, G. JACK	22 NAME		
STREET ADDRESS	5840 S.W. 119TH STREET	23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP		
TITLE	TD	31 TITLE		☑ Change ☐ Addition
NAME	RUBINOFF, E.	32 NAME		
STREET ADDRESS	15220 S.W. 74TH PL	33 STREET ADDRESS	90 EDGEWATER DRIVE #1227	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	CORAL GABLES, FL 33133	
TITLE	SD	41 TITLE		☑ Change ☐ Addition
NAME	RUBINOFF, E	42 NAME		
STREET ADDRESS	15220 SW 74TH PL	43 STREET ADDRESS	90 EDGEWATER DRIVE #1227	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	CORAL GABLES, FL 33133	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I 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)(i), Florida Statutes. I further certify that the 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 11 or Block 14 (changed), or on an attached sheet with an asterisk.

SIGNATURE: Ed Rubinoff 2/28/95 (305)958-6200
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL WHO OFFICER OR DIRECTOR — Date — Daytime Phone #

0133713 CP