FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

1-29-96 B-0434C

DOCUMENT # **603800** **(4)**

1. Corporation Name

BERNHARD GARFINKEL, PROFESSIONAL ASSOCIATION

Principal Place of Business
1235 FUNSTON STREET
HOLLYWOOD FL 33019

Mailing Address
1235 FUNSTON STREET
HOLLYWOOD FL 33019

3. Date Incorporated or Qualified: **08/24/1972**
3a. Date of Last Report: **04/28/1995**

2. Principal Place of Business (21)
Suite, Apt. #, etc (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: **59-1423501** — 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

9. **Name and Address of Current Registered Agent**

GARFINKEL,BERNHARD
1235 FUNSTON ST.
HOLLYWOOD FL 33019

10. **Name and Address of New Registered Agent**

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: (Signature type or print name of new registered agent) (Prior Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GARFINKEL,BERNHARD
STREET ADDRESS	1235 FUNSTON ST
CITY-ST-ZIP	HOLLYWOOD FL
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
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STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or is included on an attachment with an address.

SIGNATURE: Bernhard Garfinkel — Bernhard Garfinkel — 1/21/96 — 305-457-7053

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)