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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 604177

KORNREICH, CASEY, CROSLAND & BRAMNICK, P.A.

	·						
Principal Place of Business		Mailing Address			T 1501/5 01/11 0£11/4 01/001 11011 1841/3 1001 01011 01011 8;011 01011 01011 01011 11011	i	
200 S. BISCAYNE BLVD. SUITE 3600. 1ST UNION FIN CNTR MIAMI FL 33131-2338 US		200 S. BISCAYNE BLVD. SUITE 3600. 1ST UNION FIN CNTR. MIAMI FL 33131-2338 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					02/22/1973 4. FEI Number Applied For	\dashv	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For S9-1448153 Not Applicable		
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional	\dashv	
22		27			5. Certifcate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	l	
23		28			Trust Fund Contribution Added to Fees	\dashv	
Zip	Country 25	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax.		
24	9. Name and Address of Current				10. Name and Address of New Registered Agent	\Box	
			81	Name	ne		
	MNICK, JAMES S S BISCAYNE BLVD., STE 3600		82	Street	et Address (P.O. Box Number is Not Acceptable)	\dashv	
	MI FL 33131		83	<u> </u>		ᅥ	
					85 Zip Code		
			84	City	FL 85 Zip Code		
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florida. Such change was autho	rized by	the corpo	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered agent		stered Agen	t signature n	re required when reinstating) DATE	_	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change XAdditi	_	
TITLE	PD PARTON DAMED V		1.1 TITLE 1.2 NAME		STD	‴	
NAME	KORNREICH, DAVID V.		13 STREET	ADORESS	Bramnick, James S.		
STREET ADDRESS CITY-ST-ZIP	255 S. ORANGE AVENUE ORLANDO FL 32801		1.4 CITY-ST-ZI		10220 S.W. 60th Avenue Miami, Florida 33156	ļ	
TITLE	SVPD		2.1 TITLE		SVPD , Change Addit	on	
NAME	CROSLAND, JAMES C.		2.2 NAME		Crosland, James C.		
STREET ADDRESS	6375 SW 116TH STREET		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33156		2. 4 CITY-S	T-ZIP	Miami, Florida 33156	_	
TITLE	VP	☐ DELETE	3.1 TITLE		☐ Change ☑ Addit	on I	
NAME	ROGERS, GORDON D	ľ	3.2 NAME		Johnson, Carmen S.	-	
STREET ADDRESS	1609 SE 12TH STREET		3.3 STREET		ss 6952 S.W. 149th Terrace		
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		3.4. CITY- ST-		Miami, Florida 33158	on	
TITLE NAME	SVPD	_	4. 2 NAME		VP		
STREET ADDRESS	CASEY, MICHAEL W. III 16060 SW 77TH COURT		4 3 STREET	ADDRESS	1 3 3 50		
CITY-ST-ZIP	MIAMI FL 33157		4.4 CITY-S		3271 Lakeview Oaks Drive		
TITLE	VP	∕ DELETE	5.1 TITLE		Iongwood, Florida 32779 □Change □Addit	on	
NAME	GRONDA, JOHN D.		5.2 NAME				
STREET ADDRESS	1560 S.W. 5TH AVENUE		5.3 STREET		iss .		
CITY-ST-ZIP	BOCA RATON FL 33432		5.4 CITY-ST	T-71P	I		
TITLE	BUCA HATUN FL 33432				C C ' T	20	
	VP	₹] DELETE	6.1 TITLE		☐ Change ※Addit	ion	
NAME		₹] DELETE		-	SEE ATTACHMENT FOR CONTINUATION	ion	

CORAL GABLES FL 33134 14. I 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 with all other like empowered.

SIGNATURE:

FILED

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90052 018 ***150.00

CR2E034 (11/98)