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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

604759

(1)

KWITNEY, KROOP & SCHEINBERG, P.A.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					T HADRID BINIT BONKS BERNI TOORS BY 1914 I DOUG	71811 <u>01911 01811 01811 01811 018</u> 11 18 5 1
420 LINCOLN RD. MIAMI BEACH FL 33139 420 LINCOLN RD. MIAMI BEACH FL 33139					DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified		THIOSING
					10/18/1973	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	<u> </u>		59-1494357	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 SU/TE 5/2 City & State		- ·	City & State		D. Fileskies Occasion Sinceria	
23		28	·	- <u></u>		\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid	
24	25 9. Name and Address of Current	29 Registered Agent	30		Personal Property Tax due June 3 10. Name and Address of New Regi	
	,	r negistered Agent		81 Name	10. Haine and Address of New Negr	stered Agent
KROOP (RICHARD I)						
420 LINCOLN RD. MIAMI BEACH FL				82 Street Add	dress (P.O. Box Number is Not Acceptable	')
******	HIII DENOTTE			83		· · · · ·
				84 City		85 Zip Code
44 5	10	and one area state fine				FL 50 Ep 0000
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, typed or printed name of registered agen		_	Agent signatura requ	uired when reinstating)	DATE DISCOURS IN 10
12.	OFFICERS AND	DELETE	13.	ic T	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	std Scheinberg, Bruce J	bittie	1.2 NA	- 1		Change Padition
STREET ADDRESS			REET ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL			Y-ST-ZIP		
TITLE	PD	DELETE	2.1 TI			☐ Change ☐ Addition
NAME	KROOP, RICHARD		2.2 NA	ME		
STREET ADDRESS	420 LINCOLN RD.		2.3 ST	REET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		2. 4 C	TY-ST-ZIP		i
TITLE		☐ DELET E	3.1 TI	LE		Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELET E	4.1 TIT			L. Change L. Addition
NAME			4. 2 N			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE		Y-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DETE IE	5.1 TIT 6.2 NA			□ ouenge □ vooition
NAME STREET ADDRESS			5.2 NA			
				REET ADDRESS Y-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.4 UI			☐ Change ☐ Addition
NAME			6.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZiP		
	·					

14. Thereby certify that the information supplied wit indicated on this annual report or supplemental officer or director of the conferation or the Block 12 or Block 13 if changed, or on part of the conference with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ital annual restort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an object of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in