## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Socretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

624618

(5)

ROSS ROSENBERG, P.A.  Principal Place of Business Mailing Address						 	<u> </u>	EU BABA BIBIA	<b> </b>
									I I I I I I I I I I I I I I I I I I I
9100 S DADI Miami FL 33	eland blvd ste 910 156	9100 S DADELAND B MIAMI FL 33156	9100 S DADELAND BLVD STE 910 MIAMI FL 33156						
						Date Incorporated or Qualified     07/01/1979	1	e of Last Re	
2. Principal Pla	ace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number		<del> </del>	Applied For
1		26	<b></b>			59-1917975		<b>-</b>	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				-		Additional
2		27	7			5. Certificate of Status Desired			Required
City & State		City & State	City & State			6. Election Campaign Financing	F-1 .	\$5.0	<b>0</b> May Be
3		28				Trust Fund Contribution	_ <u>U</u>	•	d to Fees
Zip	Country			ntry		8. This corporation has liability for i	-	ax under s	199.032,
41	25   29   30   9. Name and Address of Current Registered Agent		30				No	Acont	
	g. Name and Addices of Contons	, negistered Agent		81	Name	10. Name and Address of New R	eğisteres	Agent	
DOCEME	PEDA DARG EGANDE								
	BERG, ROSS, ESQUIRE DADELAND BLVD STE 910			82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
MIAMI F			ŀ	83					
MINNE	L 33190		,	_					
				84	City		FL	85 Zig	p Code
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section	la. Such change was authori.	zed by the c	ve-n.	iamed corpora oration's board	ation submits this statement for the pur d of directors. I horeby accept the appo	pose of ch	anging its r	egistered office Lagent, Lam
SIGNATURE _	a no o reloc oversilas alla libral elec.	v	escentia						
12.	Signature, typed or printed name of registered agos La OFFICERS AND		IOTE Registered .	Agen:	t signature required	ADDITIONS/CHANGES TO OFFI	DATE ICERS AND	NECCIO	NOC IN 12
TILE	PSD			ILE		ADDITIONS/OTANGES TO GET		Change	Addition
NAME	ROSENBERG, ROSS		1.2 NA				•		
STREET ADDRESS 9100 S DADELAND STE 910			1.3 STREET ADDRESS		ADDRESS				
City-\$1-ZiP	MIAMI FL			I CITY-ST-ZIP					
THLE		☐ DELETE	2 1 TI		- <u></u>			Change	☐ Addition
NAME				ME			-		
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS				
CITY - ST- ZIP			2 4 CITY-ST-ZIP		T - <b>Z</b> IP				
101.6		☐ DELETE	3 1 TITLE				1	Change	Addition
NAME			3 2 NA	ME					
STREET ADDRESS			3 3 S1	IREET	ADDRESS				
CITY: ST-ZIP		-remains an account to the second and a second a second and a second a	3.4 CIT	[Y-S]	[ - ZIP		····		
TITLE		☐ DELETE	4 1 TF	1LF		<del></del>		Change	Add tion
NAME			4 2 NA	ME					
STREET ADDRESS			4 3 \$1	REETA	ADDRESS				
CITY-S1-ZIP			4 4 CIT		! - ZIP		····	<del>_</del>	
TITLE		☐ DELETE	5 1 <b>T</b> I				l	Change	☐ Addition
NAME	ļ		5 2 NA						
STREET ADDRESS					ADDRESS				
CHY-ST-ZIP	<u></u>	□ DELCIC	5.4 CIT		f - ZiP		·	Change	F Addition
TOTLE	i	☐ DELETE	6 1 Til				ι	Change	☐ Addition
NAME CIDITI ADDRECC			6 2 NA						
STREET ADDRESS					ADDRESS				
CHY-ST-ZIP	certify that the information supplied w	ith this filing is voluntarily fur	nished and d			or the exemption stated in Section 119.0	07/3Vk) Fk	tida Statut	toe I further
certify that	the information indicated on this annua	al report or supplemental and	nual report is	s true	e and accurate	te and that my signature shall have the section of	same legal	effect as if	f made under

ROSS RECEMBER 4-11-96 (305)670-1010

OF SIGNING OFFICER OR DIRECTOR

Daylor & Proce &