

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY -1 AM 4:27

DOCUMENT # 677012

(7)

1. Corporation Name:

6060 COLLINS CORP.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1228 ALTON ROAD
MIAMI BEACH FL 33139

Mailing Address

1228 ALTON ROAD
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1980

3a. Date of Last Report

04/29/1994

4. FEI Number

59-2015521

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 state debts under Chapter 218, Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. # etc.

22

City & State

23

24

2a. Mailing Address

26

Suite, Apt. # etc.

27

City & State

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29

30

9. Name and Address of Current Registered Agent

FEINGOLD, LAURENCE
1111 LINCOLN ROAD
MIAMI BEACH FL 33139

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 607.01(2), 607.02 and 607.15(2), Florida Statutes, this 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 provisions of Sections 607.01(2), 607.02, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME

NAME

STREET ADDRESS

CITY, STATE, ZIP

PD
WAGENBERG, SALO
1228 ALTON RD
MIAMI BEACH FL

NAME

NAME

STREET ADDRESS

CITY, STATE, ZIP

VD
DUNARVSKY, DOV
1228 ALTON RD
MIAMI BEACH FL

NAME

NAME

STREET ADDRESS

CITY, STATE, ZIP

STD
GLUCK, MAURICIO
1228 ALTON RD
MIAMI BEACH FL

NAME

NAME

STREET ADDRESS

CITY, STATE, ZIP

NAME

NAME

STREET ADDRESS

CITY, STATE, ZIP

1. NAME

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30. NAME

SIGNATURE:

(Signature of Registered Agent or Registered Agent's Representative)

DOV DUNARVSKY

4/17/95

(305) 534-1166