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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Scoretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

F06658

(1)

WOLPER ROSS & COMPANY OF MIAMI, INC.

FILED May 01 1996 8:00 am Secretary of State



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Principal Place of Business Mailing Address						L LEBINGO NIN SONO CONT.	HUU 4000 01 01 01 1	JEBUT BEBUT BIRI	II WOOD DIOTS INDE
400 PARK AV NEW YORK		400 PARK AVENUE NEW YORK NY 1002	400 PARK AVENUE NEW YORK NY 10022						
						3. Date Incorporated or Qualified 3a. Date of Last Report 11/24/1980 05/01/1995			•
2. Principal Pi.	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
Suite, Apt	#. etc.	Suite Apt. #, etc.		•		59-2046963		607	Not Applicable
		27				5. Certificate of Status Desired	₽ŽÍ	Fee	5 Additional Required
23	,	28				6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip	Country	Zip	Соп	 ntry	<u>,,</u>	8. This corporation has liability for	: intangible		
24	25	29	30			Florida Statutes	s 🖪 No		,
	9. Name and Address of Currer	it Registered Agent			1	10. Name and Address of New	Registere	J Agent	
				81	Name				
CT COR				Street Add	ddress (P.O. Box Number is Not Acceptable)				
	PINE ISLAND ROAD TION FL 33324		}	83					
LEMIN	310H FL 33329								<u>.</u>
				84	City		F	85 Z	ip Code
CICALATUE	th, and accept the obligations of, Sect Signature typed or profest name of registerial agrical OFFICERS ANI	and the dasphrase (1		A, Fa	1s gratuo regime	ed war reistang. ADDITIONS/CHANGES TO OF	DĂŤE FICERS AN	ID DIRECTO	OBS IN 12
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14 I do hereby	vicertify that the information supplied v	with this filma is valuatedly for				for the evenuation stated in Section 111	5 07:0:04 E	Incide Challe	4 (4 4)

Full 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 on an attachment with an address.

SIGNATURE: __

(212) 359- 5566 Daythe Phone #