

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F29921** (6)

1. Corporation Name

LAMONT & NEIMAN, P.A.

Principal Place of Business

**ONE BISCAYNE TOWER - SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI FL 33131**

Managing Office

**ONE BISCAYNE TOWER - SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI FL 33131**



2. Principal Place of Business

2a. Mailing Address

21. State, Apt. # or

26. State, Apt. # or

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. 25.

29. 30.

9. Name and Address of Current Registered Agent

**LAMONT, ROBERT S.
ONE BISCAYNE TOWER, SUITE 3550
2 SO. BISCAYNE BLVD.
MIAMI FL 33131**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

3. Date Incorporated or Qualified

05/05/1981

3a. Date of Last Report

01/20/1995

4. FEI Number

59-2095332

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 intangible tax under s. 193.032
Florida Statutes

☒

Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.0105, 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 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. NAME

**SD
NEIMAN, JAN S.
2 SO. BISCAYNE BLVD.
MIAMI FL**

☐ DELETE

14. ADDRESS

**PD
LAMONT, ROBERT S.
2 SO. BISCAYNE BLVD.
MIAMI FL**

☐ DELETE

15. ADDRESS

☐ DELETE

16. ADDRESS

☐ DELETE

17. ADDRESS

☐ DELETE

18. ADDRESS

☐ DELETE

19. ADDRESS

☐ DELETE

20. ADDRESS

☐ DELETE

21. ADDRESS

☐ DELETE

22. ADDRESS

☐ DELETE

23. ADDRESS

☐ DELETE

24. ADDRESS

☐ DELETE

25. ADDRESS

☐ DELETE

26. ADDRESS

☐ DELETE

27. ADDRESS

☐ DELETE

28. ADDRESS

☐ DELETE

29. ADDRESS

☐ DELETE

30. ADDRESS

☐ DELETE

31. ADDRESS

☐ DELETE

32. ADDRESS

☐ DELETE

33. ADDRESS

☐ DELETE

34. ADDRESS

☐ DELETE

35. ADDRESS

☐ DELETE

36. ADDRESS

☐ DELETE

37. ADDRESS

☐ DELETE

38. ADDRESS

☐ DELETE

39. ADDRESS

☐ DELETE

40. ADDRESS

☐ DELETE

41. ADDRESS

☐ DELETE

42. ADDRESS

☐ DELETE

43. ADDRESS

☐ DELETE

44. ADDRESS

☐ DELETE

45. ADDRESS

☐ DELETE

46. ADDRESS

☐ DELETE

47. ADDRESS

☐ DELETE

48. ADDRESS

☐ DELETE

49. ADDRESS

☐ DELETE

50. ADDRESS

☐ DELETE

51. ADDRESS

☐ DELETE

52. ADDRESS

☐ DELETE

53. ADDRESS

☐ DELETE

54. ADDRESS

☐ DELETE

55. ADDRESS

☐ DELETE

56. ADDRESS

☐ DELETE

57. ADDRESS

☐ DELETE

58. ADDRESS

☐ DELETE

59. ADDRESS

☐ DELETE

60. ADDRESS

☐ DELETE

61. ADDRESS

☐ DELETE

62. ADDRESS

☐ DELETE

63. ADDRESS

☐ DELETE

64. ADDRESS

☐ DELETE

65. ADDRESS

☐ DELETE

66. ADDRESS

☐ DELETE

67. ADDRESS

☐ DELETE

68. ADDRESS

☐ DELETE

69. ADDRESS

☐ DELETE

70. ADDRESS

☐ DELETE

71. ADDRESS

☐ DELETE

72. ADDRESS

☐ DELETE

73. ADDRESS

☐ DELETE

74. ADDRESS

☐ DELETE

75. ADDRESS

☐ DELETE

76. ADDRESS

☐ DELETE

77. ADDRESS

☐ DELETE

78. ADDRESS

☐ DELETE

79. ADDRESS

☐ DELETE

80. ADDRESS

☐ DELETE

81. ADDRESS

☐ DELETE

82. ADDRESS

☐ DELETE

83. ADDRESS

☐ DELETE

84. ADDRESS

☐ DELETE

85. ADDRESS

☐ DELETE

86. ADDRESS

☐ DELETE

87. ADDRESS

☐ DELETE

88. ADDRESS

☐ DELETE

89. ADDRESS

☐ DELETE

90. ADDRESS

☐ DELETE

91. ADDRESS

☐ DELETE

92. ADDRESS

☐ DELETE

93. ADDRESS

☐ DELETE

94. ADDRESS

☐ DELETE

95. ADDRESS

☐ DELETE

96. ADDRESS

☐ DELETE

97. ADDRESS

☐ DELETE

98. ADDRESS

☐ DELETE

99. ADDRESS

☐ DELETE

100. ADDRESS

☐ DELETE

101. ADDRESS

☐ DELETE

102. ADDRESS

☐ DELETE

103. ADDRESS

☐ DELETE

104. ADDRESS

☐ DELETE

105. ADDRESS

☐ DELETE

106. ADDRESS

☐ DELETE

107. ADDRESS

☐ DELETE

108. ADDRESS

☐ DELETE

109. ADDRESS

☐ DELETE

110. ADDRESS

☐ DELETE

111. ADDRESS

☐ DELETE

112. ADDRESS

☐ DELETE

113. ADDRESS

☐ DELETE

114. ADDRESS

☐ DELETE

115. ADDRESS

☐ DELETE

116. ADDRESS

☐ DELETE

117. ADDRESS

☐ DELETE

118. ADDRESS

☐ DELETE

119. ADDRESS

☐ DELETE

120. ADDRESS

☐ DELETE

121. ADDRESS

☐ DELETE

122. ADDRESS

☐ DELETE

123. ADDRESS

☐ DELETE

124. ADDRESS

☐ DELETE

125. ADDRESS

☐ DELETE

126. ADDRESS

☐ DELETE

127. ADDRESS

☐ DELETE

128. ADDRESS

☐ DELETE

129. ADDRESS

☐ DELETE

130. ADDRESS

☐ DELETE

131. ADDRESS

☐ DELETE

132. ADDRESS

☐ DELETE

133. ADDRESS

☐ DELETE

134. ADDRESS

☐ DELETE

135. ADDRESS

☐ DELETE

136. ADDRESS

☐ DELETE

137. ADDRESS

☐ DELETE

138. ADDRESS

☐ DELETE

139. ADDRESS

☐ DELETE

140. ADDRESS

☐ DELETE

141. ADDRESS

☐ DELETE

142. ADDRESS

<

FILE NO. 111 AFTER 11:00 3225.30

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # Corporation Name LAMONT & NEIMAN, P.A.	F29921	(6)
---	---------------	------------

Principal Place of Business ONE BISCAYNE TOWER - SUITE 3550 2 SO. BISCAYNE BLVD. MIAMI FL 33131	Mailing Address ONE BISCAYNE TOWER - SUITE 3550 2 SO. BISCAYNE BLVD. MIAMI FL 33131
--	--

21 Principal Place of Business Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	25 Mailing Address Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
--	--

3. Date Incorporated or Qualified 05/05/1981	3a. Date of Last Report 01/20/1995
4. FEI Number 59-2095332	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent LAMONT, ROBERT S. ONE BISCAYNE TOWER, SUITE 3550 2 SO. BISCAYNE BLVD. MIAMI FL 33131

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 State FL 85 Zip Code

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 agent and title if applicable) (NOTE: Registered Agent signature required when reappointing) DATE _____

OFFICERS AND DIRECTORS	
SD NEIMAN, JAN S. 2 SO. BISCAYNE BLVD. MIAMI FL	☐ DELETE
PD LAMONT, ROBERT S. 2 SO. BISCAYNE BLVD. MIAMI FL	☐ DELETE
1 NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE
2 NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE
3 NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE
4 NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE
5 NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE

13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

I do 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: Robert S. Lamont 2/1/96 305-530-9400
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Robert S. Lamont, President

CR2F034 (12/95)