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Mar 09, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **F70191**

1. Corporation Name

ROSENBLUM, OLIVER & ALMAN, P.A.

Principal Place	e of Business	Mailing Address								
	osenblum, esq. O Hollywood Blvd.		% TERRY M ROSENBLUM, ESO. SUITE 401, 2450 HOLLYWOOD BLVD.							
HOLLYWOOD F		HOLLYWOOD FL 33020-661					DO NOT WRITE IN THIS SPACE			
NOLET WOOD .	C 50020 0010					3. Date Incorporated or Qualifed				
						03/08/1982				
2. Principal Pl	2a. Mailing Address	Mailing Address			4. FEI Number		Ar	oplied For		
21		26	26			59-2190532	_	No	ot Applicable	
Suite, Apt.	#, etc: -	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		~\$8.75°	Additional	
22		27	27			5. Certificate of Status Desired		-Fee Re	equired .	
City & State	e	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Zip Country			8. This corporation owes the curre	ent year inta			
24	25	29	30			Personal Property Tax.		☐Yes	□No	
	9. Name and Address of Curre	nt Registered Agent		L,		10. Name and Address of New R	egistered /	\gent		
				81	Name			•	{	
ROSENBLUM, TERRY M., ESQ.				82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)	<u> </u>	_	
	E 401, 2450 HOLLYWOOD BL\	/D.	02 State A							
HOL	LYWOOD FL 33020			83					1	
•				84	- Cit.		<del></del>	85 Zip	Code	
				04	City	•	FL	63   Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the a	bove	-named corpo	oration submits this statement for the	purpose of	changing its	registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was at	Jthorized	o by i	tne corporatio	n's board of directors. I hereby accep	t the appoir	itment as re	egistered	
3	IT TAITIMAL WILL, and accept the oblig	ations or, section our rosus, radi	ida Otat	U163.						
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE:	Registered	Agent	t signature required	I when reinstating)	DATE	•		
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OF	ICERS AN	D DIRECTO	ORS IN 12	
TITLE	P	☐ DELETE		TLE				Change	Addition	
NAME	ROSENBLUM, TERRY M		1.2 N/	AME					f	
STREET ADDRESS	2450 HOLLYWOOD BLVD #4	01	1.3 S	TREET	ADDRESS	•			1	
CITY-ST-ZIP	HOLLYWOOD, FL 00000		1.4 C	ITY-ST	r-ZIP			1.5		
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE	2.1 TI					Change	☐ Addition	
NAME			2.2 N	AMF					f	
					ADDRESS				}	
STREET ADDRESS		~ * *		TY-S						
CITY-ST-ZIP TITLE			3.1 TI		1-ZIF			☐ Change	☐ Addition	
			3.2 N					_ •	_	
NAME					ADDRESS				ŀ	
STREET ADDRESS										
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NAME			1						ļ	
STREET ADDRESS					ADDRESS				[	
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NAME			5.2 N							
STREET ADDRESS			•		ADDRESS				]	
CITY-ST-ZIP				ITY-SI	r- ZIP					
TITLE		☐ DELETE	6.1 TI					Change	Addition	
NAME			6.2 N							
OTDECT ADDRESS	1		6.3 \$	TREET	ADDRESS				\ \	

14. I hereby vertify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP