

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

CORPORATION  
ANNUAL REPORT  
1995

FLORIDA DEPARTMENT OF STATE  
Sanford M. Reinstein  
Secretary of State  
Tallahassee, Florida 32399-0001



**APPROVED  
AND  
FILED**

MAY 10 AM 10:25

**DOCUMENT # G80090 (5)**  
**LAW OFFICES OF SANFORD M. REINSTEIN, P.A.**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Principal Place of Business: **1490 W. 49TH PLACE SUITE 398 HIALEAH FL 33012**  
Mailing Address: **1490 W. 49TH PLACE SUITE 398 HIALEAH FL 33012**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. State	26. State
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

3. Date Incorporated or Qualified <b>01/24/1984</b>	3a. Date of Last Report <b>06/17/1994</b>
4. FEI Number <b>59-2364042</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under § 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**  
**REINSTEIN, SANFORD M.  
1490 W. 49TH PLACE  
SUITE 398  
HIALEAH FL**

**10. Name and Address of New Registered Agent**

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 607.01(3) 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 of registered agent I am appointing and accept the obligations of Section 607.01(3), Florida Statutes.

SIGNATURE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

12.1	DP <b>REINSTEIN, SANFORD M. 1490 W 49 PLACE HIALEAH FL</b>
12.2	
12.3	
12.4	
12.5	
12.6	
12.7	
12.8	
12.9	

**13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12**

13.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	
13.3	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4	
13.5	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	
13.7	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8	
13.9	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(3), Florida Statutes. I further certify that the information included 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 on the return of the corporation or on an attachment with an address.

**SIGNATURE:** **SANFORD M. REINSTEIN** 5/4/95 305 5575055  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR