

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

CORPORATION  
ANNUAL REPORT  
1995



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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 8:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **G93012** (4)

HARVEY L. RUBINCHIK, P.A.

DO NOT WRITE IN THIS SPACE

Principal Place of Business 1776 N. PINE ISLAND RD. #118 PLANTATION FL 33322	Mailing Address 1776 N. PINE ISLAND RD. #118 PLANTATION FL 33322
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3. Date incorporated or Qualified <b>03/19/1984</b>	3a. Date of Last Report <b>06/10/1994</b>
4. FEI Number <b>62-1195792</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 had its certificate for under § 100.019 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Previous Place of Business 21	2a. Mailing Address 26
State, Apt. # etc. 22	Suite, Apt. # etc. 27
City & State 23	City & State 28
City 24	State 25
City 29	State 30

9. Name and Address of Current Registered Agent

**RUBINCHIK, HARVEY L.  
1776 N. PINE ISLAND RD.  
SUITE 118  
PLANTATION FL 33322**

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 **FL**

11. I, the undersigned, in accordance with Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or the registered agent, as 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 hereby willing to accept the obligations of Sections 607.0405, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME <b>PSD RUBINCHIK, HARVEY L.</b>	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	13.1 NAME	
12.2 STREET ADDRESS <b>1776 N. PINE ISLAND RD., STE. 118</b>	13.2 STREET ADDRESS	13.2 STREET ADDRESS	
12.3 CITY, STATE, ZIP <b>PLANTATION FL 33322</b>	13.3 CITY, STATE, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	13.3 CITY, STATE, ZIP	
12.4 NAME	13.4 NAME	13.4 NAME	
12.5 STREET ADDRESS	13.5 STREET ADDRESS	13.5 STREET ADDRESS	
12.6 CITY, STATE, ZIP	13.6 CITY, STATE, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	13.6 CITY, STATE, ZIP	
12.7 NAME	13.7 NAME	13.7 NAME	
12.8 STREET ADDRESS	13.8 STREET ADDRESS	13.8 STREET ADDRESS	
12.9 CITY, STATE, ZIP	13.9 CITY, STATE, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	13.9 CITY, STATE, ZIP	
12.10 NAME	13.10 NAME	13.10 NAME	
12.11 STREET ADDRESS	13.11 STREET ADDRESS	13.11 STREET ADDRESS	
12.12 CITY, STATE, ZIP	13.12 CITY, STATE, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	13.12 CITY, STATE, ZIP	
12.13 NAME	13.13 NAME	13.13 NAME	
12.14 STREET ADDRESS	13.14 STREET ADDRESS	13.14 STREET ADDRESS	
12.15 CITY, STATE, ZIP	13.15 CITY, STATE, ZIP	13.15 CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 111.01(2)(g), 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. I am the owner of the corporation and I am authorized to execute this report as required by Chapter 107, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report. I am attaching with my report \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
DATE: **4/30/95** TIME: **(305) 474-2001**