

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

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham** \*  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**  
 97 JUN 24 PM 12:45  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT #**  
 1. Corporation Name

**GC3012**  
**HARVEY L. RUBINCHIK, P.A.**

Principal Place of Business

Mailing Address

**1776 N. Pine Island Road  
 Suite 118  
 Plantation, FL 33322**

3. Date Incorporated or Qualified

**3/19/84**

3a. Date of Last Report

**5/1/96**

4. FET Number

**621195792**

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. 199.032, Florida Statutes  Yes  No

21. Principal Place of Business

2a. Mailing Address

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State

28. City & State

24. Zip

25. Country

29. Zip

30. Country

**9. Name and Address of Current Registered Agent**

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

**HARVEY L. RUBINCHIK, ESQ  
 1776 N. Pine Island Rd #118  
 Plantation, FL 33322**

81. Name

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

83.

84. City

**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 (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**12. OFFICERS AND DIRECTORS**

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

TITLE: **President**  DELETE  
 NAME: **Harvey L. Rubinchik, Esq.**  
 STREET ADDRESS: **1776 N. Pine Island Rd #118**  
 CITY - ST - ZIP: **Plantation, Florida 33322**

11. TITLE:  Change  Addition  
 12. NAME: **500002224075--3**  
 13. STREET ADDRESS: **-06/26/97--01080--022**  
 14. CITY - ST - ZIP: **\*\*\*\*165.00 \*\*\*\*165.00**

TITLE:  DELETE  
 NAME:  
 STREET ADDRESS:  
 CITY - ST - ZIP:

21. TITLE:  Change  Addition  
 22. NAME:  
 23. STREET ADDRESS:  
 24. CITY - ST - ZIP:

TITLE:  DELETE  
 NAME:  
 STREET ADDRESS:  
 CITY - ST - ZIP:

31. TITLE:  Change  Addition  
 32. NAME:  
 33. STREET ADDRESS:  
 34. CITY - ST - ZIP:

TITLE:  DELETE  
 NAME:  
 STREET ADDRESS:  
 CITY - ST - ZIP:

41. TITLE:  Change  Addition  
 42. NAME:  
 43. STREET ADDRESS:  
 44. CITY - ST - ZIP:

TITLE:  DELETE  
 NAME:  
 STREET ADDRESS:  
 CITY - ST - ZIP:

51. TITLE:  Change  Addition  
 52. NAME:  
 53. STREET ADDRESS:  
 54. CITY - ST - ZIP:

TITLE:  DELETE  
 NAME:  
 STREET ADDRESS:  
 CITY - ST - ZIP:

61. TITLE:  Change  Addition  
 62. NAME:  
 63. STREET ADDRESS:  
 64. CITY - ST - ZIP:

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Sect on 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.

**SIGNATURE:**   
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/10/97** Date  
**(954) 474-2001** Daytime Phone #

CR2E034 (9/96)