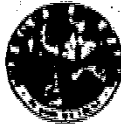


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # H80525

1. Corporation Name

SIMON, MOSKOWITZ & MANDELL, P.A.

Principal Place of Business

**800 Corporate Dr.
Suite 510
Ft. Lauderdale, FL 33334**

Mailing Address

**800 Corporate Dr.
Suite 510
Ft. Lauderdale, FL 33334**

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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		10/14/1985			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FBI Number		Applied For	
22		27		59-2588564		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing		☐ \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution			
24		25		29		30	
Zip		Country		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent

**Simon, Eric A.
800 Corporate Drive, Suite 510
Ft. Lauderdale, FL 33334**

10. Name and Address of New Registered Agent

81	Name	Michael W. Moskowitz	
82	Street Address (P.O. Box Number is Not Acceptable)	800 Corporate Drive	
83		Suite 510	
84	City	Ft. Lauderdale	85 Zip Code 33334

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

Michael W. Moskowitz

Michael W. Moskowitz, President

3/28/95

(Signature, typed or printed name of registered agent and this is required)

(NOTE: Registered Agent signature required when running)

(DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1. TITLE	☒ Change ☐ Addition
NAME		2. NAME	
STREET ADDRESS		3. STREET ADDRESS	D/P MOSKOWITZ, MICHAEL W. 800 Corporate Dr., Suite 510 Ft. Lauderdale, FL 33334
CITY - ST - ZIP		4. CITY - ST - ZIP	☐ Change ☐ Addition
TITLE		5. TITLE	
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	D/V /S MANDELL, CRAIG J. 800 Corporate Dr., Suite 510 Ft. Lauderdale, FL 33334
CITY - ST - ZIP		8. CITY - ST - ZIP	☒ Change ☐ Addition
TITLE		9. TITLE	
NAME		10. NAME	D/V /T SALIM, WILLIAM G., JR. 800 Corporate Dr., Suite 510 Ft. Lauderdale, FL 33334
STREET ADDRESS		11. STREET ADDRESS	☐ Change ☐ Addition
CITY - ST - ZIP		12. CITY - ST - ZIP	
TITLE		13. TITLE	
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	DELETE: Eric A. Simon Kenneth A. Rubin
CITY - ST - ZIP		16. CITY - ST - ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 its receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on a deletion block with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael W. Moskowitz, President

3/28/95 305-491-2000

Date

Telephone Number

3-31-95