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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K57825

(7)

TABAS, SINGERMAN & FREEDMAN, P.A.

Principal Place of Business Mailing Address

FILED
Apr 23 1998 8:00am
Secretary of State



Principal Plac	e of Business	Mailing Address							
C/O JOEL L. TABAS 25 SE 2ND AVE STE 919 MIAMI FL 33131		C/O JOEL L. TABAS 25 SE 2ND AVE STE 9 MIAMI FL 33131	C/O JOEL L. TABAS 25 SE 2ND AVE STE 919			DO NOT WRITE IN THIS SE	PACE		
	·•·	MICAMI I C 00101				3. Date Incorporated or Qualified			
						01/12/1989			
2. Principal P	Place of Business	2s. Mailing Address				4, FEI Number	Δ	pplied For	
21		26				65-0094704	Not Applicable		
Suite, Apt	₩, etc	Suite, Apt #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	5. Certificate of Status Desired See Required Fee Required		
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	May Be	
23	····	28				Trust Fund Contribution	Added	to Fées	
Ζιρ	Country	Zip	Cou	intry		8. This corporation owes or has paid the curre			
24	25	29[30	, .				No	
	9. Name and Address of Cure	rent Hegistered Agent		81	Name	10. Name and Address of New Registered A	gent		
	BAS, JOEL L.			"	Name				
	S.E. 2 AVENUE			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
	(TE 919			83					
ML	AMI FL 33131			63					
				84	City		85 Zip	Code	
11 Purguant	to the provisions of Sections 607.0	5.02 and 607 1508 Florida State	utos the at	20)/0	named cor	FL poration submits this statement for the purpose of c		ito ropintorod	
	registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida, Such Change was ligations of, Section 607.0505, F	s authorized Florida Stat	o by utes	the corpora	tion's board of directors. I hereby accept the appoi	ntment as	s registered	
SIGNATURE	Standore: Typort or printed name of regulation	agent and tilled applicable (NC	Off Registered	1 Age	nt signature requ	red when reinstaling) DATE			
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND I	SIRECTO	RS IN 12	
TITLE	PT	DELETE	1.1 Til	TLE.			Change	Addition	
NAME	TABAS, JOEL L		12 NA	ME					
STREET ADDRESS	25 S.E. SECONT AVE. STE	. 919	1.3 ST	REET.	ADDRESS				
CITY - ST - ZIP	MIAMI FL 33131		1.4 Cf	1Y-\$1	- 719				
THILE	V	OELETE	2.1 TH	ſLF			Change	☐ Addition	
NAME	SINGERMAN, MARTE V	•	2.2 NA	ME					
STREET ADDRESS	25 S.E. SECONT AVE. STE	. 919	2.3 \$1	AEE1	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131		2 4 01		Y-ZIP				
TETLE	8	☐ DELETE	3.1 717	LE	V	ice President	Change	Addition	
NAME	FREEDMAN, GARY M		3.2 NA	ME		reedman, Gary M.			
STREET ADDRESS	25 S.E. SECONT AVE. STE	. 919	3.3 S1	REET	ADDRESS)	5 SE Second Ave, Ste 919	^		
CITY-ST-ZIP	MIAMI FL 33131		34 CI		T-ZIP				
TITLE		☐ DELETE	4 1 T(T		رسا ا		Change	Addition	
NAME			4. 2 N/	AME	s	ecretary		•	
STREET ADDRESS			4381	REETA	adoress 🖁 🔿	rshan. Paul I.			
CITY - ST - ZIP	<u> </u>	· · · · · · · · · · · · · · · · · · ·	4.4 CIT		-7IP 2	5 SE Second Ave, Ste 9	<u> </u>		
TITLE		☐ DELETE	5 1 TIT		М	iami, FL 33131	Change	Addition Addition	
NAME			5 2 NA		_	·			
STREET ADDRESS			5.3 STI	REET	ADDRESS				
CITY - ST - ZIP	 		5.4 CIT		- 71P				
TATLE		DECETE	6 1 TIT	ΊĒ			_) Change	Addition	
NAME			62 NA	ME					
STREET ADDRESS			63 \$11	REETA	ADDRESS				
CITY-ST ZIP			64 CIT	Y-ST	-ZIP				

14. Thereby certify that the information supplied with this filing 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 suppliemental 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 convert 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.

CIGNATURE.