Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90246 022 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K59373

1. Corporation Name

JEFF ROSENBERG, INC.

Principal Place of Business Mailing Address					f iffeifitt for ditif iffen terte innot tret diett annet ninte minte minte minte minte minte minte
•		1655 DREXEL AVE.			
1655 DREXEL AVE. 209		209			
MIAMI BEACH F	FL 33139	MIAMI BEACH FL 33139	— -		DO NOT WRITE IN THIS SPACE
US		US			3. Date incorporated or Qualifed
					01/19/1989
2. Principal Pl	ace of Business	2a. Mailing Address	_		4. FEI Number Applied For
21		26			65-0095051 Not Applicable
Suite, Apt. :	#, etc.	 	Suite, Apt. #, etc.		5. Certificate of Status Desired
22			27 City 8 State		
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Country	Zip	Cour	nto.	
Zip	Country	— · ·	30	itry	8. This corporation owes the current year Intangible Personal Property Tax.
24 -	9. Name and Address of Curre		30		10. Name and Address of New Registered Agent
	- Name and Address of Curre	it Registered Agent		81 Nam	
ROS	enberg, ross		L		
	S DADELAND BLVD		82 Street Add		treet Address (P.O. Box Number is Not Acceptable)
	DATRAN CENTER SUITE 910		ļ.	83	
	Al FL 33156			-	<u> </u>
ivin sn			Ţ	84 City	ity FL 85 Zip Code
44 =		00 1007 4500 FL Sds C4-4-4-			• - 1
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 (NOTE: Registered Agent signature required when reinstation) DATE					
	Signature, typed or printed name of registered age	ont and title if applicable. (NOTE:	Registered /	Agent signatui	nature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PST OFFICERS AI	DELETE	1.1 1111		Change Addition
,			1.2 NA		
NAME `	ROSENBERG, JEFFREY			NEET ADDRES	yorgo I
STREET ADDRESS	1655 DREXEL AVE #208		1		
CITY-ST-ZIP	MIAMI BCH FL	DELETE	2.1 TIT	Y-ST-ZIP	. ☐ Change ☐ Addition
TITLE	D				
NAME !	ROSENBERG, JEFFREY		2.2 NA		·
STREET ADDRESS	1655 DREXEL AVE. #208			REET ADDRES	
CITY-ST-ZIP	MIAMI BCH FL		_	ry-ST-ZIP	P Change Addition
TITLE	,	☐ DELETE	3.1 TITI		
NAME			3.2 NA		
STREET ADDRESS			1	REET ADDRES	1
CITY-ST-ZIP			_	γ-ST-ZIP	P Change Addition
TITLE		☐ ØELETE	4.1 TIT		☐ Change ☐ Addition
NAME	. •		4.2 NA	. =	
STREET ADDRESS			4.3 ST	REET ADDRES	PRESS
CITY-ST-ZIP			_	Y-ST-ZIP	
TITLE	l vege	☐ DELETE	5.1 TIT		Change Addition
NAME	<i>,</i>		5.2 NA		
STREET ADDRESS	•			REET ADDRES	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE	,	☐ DELETE	6.1 TIT		☐ Change ☐ Addition
NAME			6.2 NA	ME	

14. I hereby 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 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, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS