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

PROFIT CORPORATION ANNUAL REPORT

DPS

LEVENTHAL, INA

4747 NW 87TH LANE

CORAL SPRINGS FL

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CiTY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Jan 14 1997 8:00am

Secretary of State

Change

Change

Change

Срапае

Addition

Addition

Addition

Addition

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUI	MENT # K6090	7 (8)				
	AUCTIONEERS, INC.					
D,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				C (MACHESIA MAN ANSA) AND AND CONTRACTOR	DE DADEL BYDE BYDE BYDE DEBY DEBY DIDIE
Principal Place of Business Mailing Address					I TH MINITY BIR OLDSYN YNDSY ONGSYL IN	
6500 N. POWERLINE ROAD FT. LAUDERDALE FL 33309 US 6500 N. POWERLINE ROAD FT. LAUDERDALE FL 33309-2024 US						
					3. Date incorporated or Qualified 01/25/1989	3a. Date of Last Report 05/09/1996
Principal Place of Business					4. FEI Number	Applied For
21 26					65-0112442	Not Applicable
22	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip					8. This corporation has liability to	r intangible tax under s. 199,032,
24	25	29	30			Yes No
Name and Address of Current Registered Agent					10. Name and Address of New R	egistered Agent
SOROTA, ALAN M. PENTHOUSE 4 - CITICENTRE 81 Name 82 Street Ad						
				ddress (P.O. Box Number Is Not Accepta	(ble)	
290 N W 165TH ST						
MIAMI FL 33169 83						
						FL 85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607,1508, Florida Statute of Florida. Such change was igations of, Section 607,0505, F	ites, the a authorize lorida Sta	bove-named of ed by the corporatutes.	corporation submits this statement for the pration's board of directors. I hereby acce	purpose of changing its registered ep: the appointment as registered
SIGNATURE	Signature, typed or printed name of registered.	consend tills if applicable	TC. Conistar	ed Agent elegature n	equired when reinstating)	DATÉ
12.		ND DIRECTORS	13.	se witer a filtering to	ADDITIONS/CHANGES TO OFFI	
TITLE	DV	DÉLÉTE	1.1	TLE		☐ Change ☐ Addition
NAME	LEVENTHAL, AARON		1.2	IAME		-
STREET ADORESS	253 JACARANDA DR.		1,3 \$	TREET ADDRESS		-
CITY-ST-ZIP	PLANTATION FL		1,4 (CITY-ST-ZIP		
πτιξ	Ī	☐ DELETE	2.1			☐ Change ☐ Addition
NAME	LEVENTHAL, ELEANOR		2.21	AME		
STREET ADDRESS	253 JACARANDA DR.		2.3 3	TREET ADDRESS		1
CITY-ST-ZIP	PLANTATION FL		2.4	317Y-ST-ZIP		

14. I do 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 of the receiver of 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 chargest or on an attackment with an accuracy.

3.1 TITLE

3.2 NAME

4.1 TETLE 4, 2 NAME

5,1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-ZiP

3.4. CITY - ST-ZIP

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