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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

K90891

(8)

GREENBERG, COHEN & COMPANY, P.A.

FILED Feb 19 1998 8:00am Secretary of State



							i III	
Principal Plac	e of Business	Mailing Address					// / /	
11790 SW 89TH STREET MIAMI FL 33186-9166		11790 SW 89TH STREET MIAMI FL 33186-9168		DO NOT WRITE IN THIS	SPACE			
					3. Date Incorporated or Qualified			
					05/25/1989			
	Place of Business	2a. Mailing Address			4. FEI Number	Applied	For	
		26			65-0117121	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Addition		
City & State City & State					& Flactice Commons Figures	<u>`</u>		
23		28	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May t Added to Fee		
Zip	Country	Country Zip C		ry	8. This corporation owes or has paid the cu			
24	25	29	30		Personal Property Tax due June 30.	Yes No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
	eenberg, Jeffrey M.		6	1 Name			ĺ	
11790 SW 89TH ST.			8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)			
MI <i>F</i>	MI FL 33186		la la	3				
			- 1	4 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								
12.	Signature, typed or printed name of registered ag	ont and little if applicable. (NOT ID DIRECTORS		gent signature req	juired when reinstating) DATE	DISECTORA III.		
TITLE	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN		Addition !	
NAME	GREENBERG, JEFFREY M.		1.2 NAM				WOIIIOII 13	
STREET ADORESS	11790 SW 89 STREET			ET ADDRESS			18	
CITY-ST-ZIP	18114 FL 00400 040		1.4 CITY					
TITLE	VP	DELETE	2.1 TITLE			Change A	Addition	
NAME	COHEN, ALBERT R	•	2.2 NAMI	:				
STREET ADDRESS	44700 014 00 07		2.3 STAE	2.3 STREET ADDRESS]		
CITY-ST-ZIP	MIAMI_FL 33186-2166			-ST-ZIP				
TITLE		DELETE 3.1 TA				☐ Change ☐ A	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STRE	T ADDRESS				
CITY-ST-ZIP			3.4. City	-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ A	Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			1	T ADDRESS				
CFTY - ST - ZIP		Desert	4.4 CITY-	ST-ZiP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ A	ddition	
NAME OTOGET ADDRESS			5.2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-	ST-ZIP		Change C	datata -	
	•		6.1 TITLE			☐ Change ☐ A	ddition	
NAME OTREET ADDRESS		•	6.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			6.4 C(TY-	ST-ZIP			1	

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 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 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 chapter 607, attachment with an address.