


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION  
ANNUAL REPORT  
1999



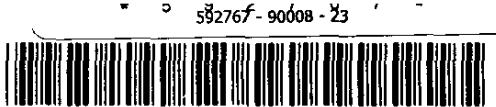
FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 21, 1999 8:00 am  
Secretary of State  
07-21-1999 90008 023 \*\*\*550.00

DOCUMENT # L35573  
1. Corporation Name  
ZEPKA/GOLDBERG OF FLORIDA REAL ESTATE CO., INC.

Principal Place of Business  
15127 CARTER ROAD  
SUITE 210  
DELRAY BEACH FL 33446

Mailing Address  
15127 CARTER ROAD  
SUITE 210  
DELRAY BEACH FL 33446



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

2a. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

3. Date Incorporated or Qualified  
12/12/1989

4. FEI Number  
22-2701641

5. Certificate of Status Desired  
\$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution  
\$5.00 May Be Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.  
Yes No

9. Name and Address of Current Registered Agent  
JOHN HOTTE ESQ.  
240 EAST COMMERCIAL BLVD  
STE 826  
FT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|----------------------|---|--|
| TITLE                      | PSD                  | 1.1 TITLE   |  |
| NAME                       | ZEPKA, GARY          | 1.2 NAME  |  |
| STREET ADDRESS             | 33 CLINTON RD.       | 1.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | WEST CALDWELL NJ     | 1.4 CITY-ST-ZIP                                       |  |
| TITLE                      | VD                   | 2.1 TITLE   |  |
| NAME                       | GOLDBERG, ROBERT     | 2.2 NAME  |  |
| STREET ADDRESS             | 33 CLINTON RD.       | 2.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | WEST CALDWELL NJ     | 2.4 CITY-ST-ZIP                                       |  |
| TITLE                      | T                    | 3.1 TITLE   |  |
| NAME                       | BORNSTEIN, RUSSELL   | 3.2 NAME  |  |
| STREET ADDRESS             | 15127 CARTER RD #210 | 3.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | DELRAY BEACH FL      | 3.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                      | 4.1 TITLE   |  |
| NAME                       |                      | 4.2 NAME  |  |
| STREET ADDRESS             |                      | 4.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                      | 4.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                      | 5.1 TITLE   |  |
| NAME                       |                      | 5.2 NAME  |  |
| STREET ADDRESS             |                      | 5.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                      | 5.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                      | 6.1 TITLE   |  |
| NAME                       |                      | 6.2 NAME  |  |
| STREET ADDRESS             |                      | 6.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                      | 6.4 CITY-ST-ZIP                                       |  |

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.

SIGNATURE: *[Signature]* 7/15/99 973-882-7439

CR2E034 (5/99)