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Profit Corporation Annual Report

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L78704

(8)

SIDNEY A. GOLDBERG, P.A.

Principal Place of Business Mailing Address % DAVID HOWARD GOLDBERG % DAVID HOWARD GOLDBERG 100 S BISCAYNE BLVD. SUITE 1102 100 S BISCAYNE BLVD. SUITE 1102 MIAMI FL 33131-2011 MIAMI FL 33131 3. Date Incorporated or Qualified 3a, Date of Last Report 06/08/1990 02/13/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0199318 Not Applicable 26 Suite Apt. # etc Suite: Apt # etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Co.intry Country Zιρ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GOLDBERG, DAVID HOWARD 81 Name 100 S BISCAYNE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 1102 83 MIAMI FL 33132 City Zip Code is 107.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered for State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the polyground of the poly 11. Pursuant to the provisions of Sec office or registered agent. I am familjar/ SIGNATURE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE GOLDBERG, SIDNEY A. NAM 1.2 NAME One se. Third Avenue, Surk 2460 28 W FLAGLER ST 12TH FLR 1.3 STREET ADDRESS STREET ADDRESS 33/3/ MIAMI FL 1.4 CITY - ST - ZIP CITY-ST-ZIF Change DELETE Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-\$1-78 2.4 CITY - ST - ZIP DELETE Change Addition THE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3 4. CITY - ST - ZIF CITY: ST 7/6 DELETE Change Addition 4.1 TITLE HILE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4 4 CITY-ST-ZIP CITY-S1-ZiE DELETE ☐ Change Addition 51 TITLE TILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-ST ZE 54 CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

TILLE

NAME

STREET ADDRESS

City - \$1 - 7(P

DELETE

61 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby cert by 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

1/17/97 (305)372-9601

Change

Addition

FILED

Jan 24 1997 8:00am

Secretary of State