## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

DIVISION OF CORPORATIONS

Secretary of State

1996

(0)

LAW OFFICES OF KENNETH N. FELDMAN, P.A.  Trincipal Place of Business Mailing Address  550 BILTMORE WAY  STE - 780  CORAL GABLES FL 33134  US  Mailing Address  CORAL GABLES FL 33134  US					3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1990 03/28/1995	
rindipa' Plad	ne of Business	2a. Mailing Address	···-		4. FEI Number	Applied For
uite, Ápt. #.	etc	Suite, Apt. #, etc.			65-0200070	Not Applicable  \$8.75 Additional
		[27]			5. Certificate of Status Desired	Fee Required
ity & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
rf.)	Country	Zip	Countr	y	8. This corporation has liability for	70000 10 1 000
	25	29	30		Florida Statutes	cN □
	9. Name and Address of Curr	ent negistered Agent	81	Name	10. Name and Address of New F	Registered Agent
	n, Kenneth N., ESQ.		82	Street Addr	ess (P.O. Box Number is Not Acceptate	ole)
	MORE WAY / STE - 780 SABLES FL 33134		83	ļ		·
CONAL C	MOLES IL 33134					
			84	City		FL B5 Zip Code
LADORESS ST. ZIP	FELDMAN, KENNETH N. 550 BILTMORE WAY / STE CORAL GABLES FL	- 780	1.3 STREE 1.3 CHY- 2.1 TITLE	T ADDRESS ST-ZIP		Change Addition
LACORESS ST-ZIF		DELETE	2 4 CITY-	T ADORESS ST-ZIP		Change C Adding
LAPORESS ST-ZIF			3 1 TILLE 3 2 NAME 3 3 STRE 3 4 CITY-	et address		Change Addition
1 ADDRESS St. Ziet		DELETE	4.1 TITLE 4.2 NAMS 4.3 STREE 4.4 CITY	T ADDRESS		Change Addition
LADORESS ST-ZIP		☐ DELETE	5 1 TITLE 52 NAME 53 STREI 54 CHY-	ET ADDRESS		☐ Change ☐ Addition
1 ADDRESS ST ZP		☐ DELETE	6 1 TITLE 6 2 NAME	ET ADDRESS		☐ Change ☐ Addition
I do hereby certify that oath, that I appears in	the information indicated on this are ani an officer or director of the cor	nnual report or supplemental a	urnished and do annual report is t stee empowered	es not qualify true and accura I to execute th	for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, F	e same legal effect as if made under lorida Statutes; and that my name