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Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M18880 (8)

1. Corporation Name

SEMET, LICKSTEIN, MORGENSTERN, BERGER, ~~ROOKE~~, B
ROOKE & GORDON, P.A.

N/C 11-27-96 or

Principal Place of Business

% HOWARD W. GORDON
201 ALHAMBRA CIRCLE, 12TH FLOOR
CORAL GABLES FL 33134

Mailing Address

% HOWARD W. GORDON
201 ALHAMBRA CIRCLE, 12TH FLOOR
CORAL GABLES FL 33134-5108



3. Date Incorporated or Qualified

08/02/1985

3a. Date of Last Report

01/23/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2560810

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GORDON, HOWARD W.
201 ALHAMBRA CIRCLE
12TH FLOOR
CORAL GABLES FL 33134

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

Signature, typed or printed name of registered agent and office if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> DELETE
NAME	BROOKE, PETER M.	
STREET ADDRESS	201 ALHAMBRA 12TH FLR	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GORDON, HOWARD W.	
STREET ADDRESS	201 ALHAMBRA 12TH FLR	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	LICKSTEIN, FRED K.	
STREET ADDRESS	201 ALHAMBRA 12TH FLR	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	MORGENSTERN, MELVIN C.	
STREET ADDRESS	201 ALHAMBRA 12TH FLR	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	SEMET, BARRY N.	
STREET ADDRESS	201 ALHAMBRA 12TH FLR	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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-01/21/97--01010--055
***165.00

01-17-97 or/14

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 filing reports 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 registered agent or a duly empowered person 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 in Block 13 if changed, or in Block 13 if changed, or in Block 13 if changed.

SIGNATURE:

Howard W. Gordon Howard W. Gordon 3 Jan 97 (305) 444-1400
Date Daytime Phone #

0182496

CR2E034 (9/96)