

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **M65124** (3)

1. Corporation Name

BILL GREENBERG SPECIAL SERVICES, INC.



Principal Place of Business

Mailing Address

99 N.E. 167 ST., SUITE 102
NORTH MIAMI BEACH FL 33162

99 N.E. 167 ST., SUITE 102
NORTH MIAMI BEACH FL 33162

2. Principal Place of Business

21 19085 NE 3rd Court
State Apt. #, etc.

2a. Mailing Address

26 19085 NE 3rd Court
State Apt. #, etc.

22. City & State

23 Miami, Florida

27. City & State

28 Miami, Florida

24. Zip

24 33179

25. Country

25 U.S.A.

29. Zip

29 33179

30. Country

30 U.S.A.

9. Name and Address of Current Registered Agent

GREENBERG, WILLIAM
20100 NW 83RD PLACE
MIAMI FL 33015

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

01/19/1988

3a. Date of Last Report

01/18/1995

4. FCI Number

65-0024067

Applied For

Not Applicable

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 has liability for intangible tax under s. 193.032 Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0662 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 607.0605, Florida Statutes.

SIGNATURE

Signature of current registered agent or officer or director

Signature of new registered agent or officer or director

Date

12. OFFICERS AND DIRECTORS		
12.1 TITLE	DP	<input type="checkbox"/> DELETE
12.2 NAME	GREENBERG, WILLIAM	
12.3 STREET ADDRESS	20100 NW 83RD PLACE	
12.4 CITY-STATE-ZIP	MIAMI FL	
12.5 TITLE	DV	<input type="checkbox"/> DELETE
12.6 NAME	GREENBERG, DEBORAH	
12.7 STREET ADDRESS	20100 NW 83RD PLACE	
12.8 CITY-STATE-ZIP	MIAMI FL	
12.9 TITLE		<input type="checkbox"/> DELETE
12.10 NAME		
12.11 STREET ADDRESS		
12.12 CITY-STATE-ZIP		
12.13 TITLE		<input type="checkbox"/> DELETE
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY-STATE-ZIP		
12.17 TITLE		<input type="checkbox"/> DELETE
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
13.1 TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
13.2 NAME	Christina Lee	
13.3 STREET ADDRESS	20100 NW 83rd Place	
13.4 CITY-STATE-ZIP	Miami, FL	
13.5 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY-STATE-ZIP		
13.9 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY-STATE-ZIP		
13.13 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY-STATE-ZIP		
13.17 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated in 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, unchanged, or in an attachment with an address.

SIGNATURE: *William Greenberg* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96 305-770-4438
Date Registered Phone #

CR2E034 (12/95)