## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

MIAMI FL 33131-2948

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1401- 1/00 MIAMI FL 33131

US



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

BOT BRICKELL AVE BOO BRICKELL AVE

DOCUMENT # P92000012459 (3)

SIEGEL AND DANSKY INVESTMENTS, INC.

BOI DRICKELL AVE 800 BRICKELL AVE

02/09/1996 12/16/1992 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0375417 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No Florida Statutes 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BLOOM, KENNETH M -801 BRICKELL AVE 800 BRICKELL AUE B2 Street Address (P.O. Box Number is Not Acceptable) SUITE ++++ 1/00 83 MIAMI FL 33131 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Segrature: typica or printed name of registered agent and fit is it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) OFFICERS AND DIRECTORS 13. 12 Addition Change DELETE 1.1 TITLE THEF SIEGEL, BARRY M 1.2 NAME NAMÉ 6910 N KENDALL DR 1.3 STREET ADDRESS STREET ADORESS **MIAMI FL 33156** 1.4 CITY-ST-ZIP CITY-S1-AF Addition DELÉTE Change 2.1 TITLE THEF DANSKY, A S 2.2 NAME NAME 6910 N KENDALL DR 2.3 STREET ADORESS STREET ADDRESS **MIAMI FL 33156** 2. 4 CITY-ST-ZIP CITY - ST - ZIF Change Addition DELETE 3.1 TITLE 101.6 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-S1-7IP Addition DELETE 4.1 TITLE THLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP City - ST - 7IP Change Addition DELETE THILE 5.1 TITLE 5.2 NAME MAM 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHT-ST-7IP Change Addition DELETE TITLE 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

14. If 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 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

SIGNATURE:

appears in Block 12 or Block 1

NAME

STREET ADDRESS

OLUMN PRINTED NAME OF SIGNING OFFICER OF DIFFECTOR

with an address

2/8/97 (305)662-9100

**FILED** 

Feb 13 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified