

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 # P93000022273 (5)

1. Corporation Name

ALAN M. BURGER, P.A.



Principal Place of Business

Mailing Address

9990 SW 77TH AVE
PENTHOUSE 5
MIAMI FL 33156

9990 SW 77TH AVE
PENTHOUSE 5
MIAMI FL 33156

2. Principal Place of Business

2a. Mailing Address

21 200 S Biscayne Blvd

26 200 S Biscayne Blvd

22 2350

27 2350

23 City & State

28 City & State

24 Miami FL

29 Miami FL

25 33130

30 33130

26 USA

31 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/23/1993

3a. Date of Last Report

02/13/1995

FBI Number

65-0397985

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. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

BURGER, ALAN M
9990 SW 77TH AVE
PH-5
MIAMI FL 33156

81 Name Alan M Burger

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

200 S Biscayne Blvd

#2350

84 Miami

FL

85 Zip Code

33130

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 607.0506, Florida Statutes.

SIGNATURE

(Signature, type or print name of registered agent and state if acceptable)

Alan M Burger

(NOTE: Registered Agent signature required when reinstating)

1/30/96

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	D	<input type="checkbox"/> DELETE
2. NAME	BURGER, ALAN M	
3. STREET ADDRESS	9990 SW 77TH AVE #PH-5	
4. CITY - ST - ZIP	MIAMI FL 33156	
5. TITLE		<input type="checkbox"/> DELETE
6. NAME		
7. STREET ADDRESS		
8. CITY - ST - ZIP		
9. TITLE		<input type="checkbox"/> DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY - ST - ZIP		
13. TITLE		<input type="checkbox"/> DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY - ST - ZIP		
17. TITLE		<input type="checkbox"/> DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. 2. NAME	
3. 3. STREET ADDRESS	200 S Biscayne Blvd 2350
4. 4. CITY - ST - ZIP	Miami FL 33130
5. 5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. 6. NAME	
7. 7. STREET ADDRESS	
8. 8. CITY - ST - ZIP	
9. 9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. 10. NAME	
11. 11. STREET ADDRESS	
12. 12. CITY - ST - ZIP	
13. 13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. 14. NAME	
15. 15. STREET ADDRESS	
16. 16. CITY - ST - ZIP	
17. 17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. 18. NAME	
19. 19. STREET ADDRESS	
20. 20. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with 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 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 appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Alan M Burger

1/30/96

Date

Daytime Phone #

CR2E034 (12/95)