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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Morthani

DIVISION OF CORPORATIONS

Secretary of State

1996

**SIGNATURE:** 

SIGNATURE AND TYPED

P93000058643 (6) DOCUMENT # Corporation Name ROBERT FUNDING CORPORATION Principal Pace of Business Mailing Address 7640 SOUTHGATE BLVD 7640 SOUTHGATE BLVD NORTH LAUDEDALE FL 33068 NORTH LAUDERDALE FL 33068 3a. Date of Last Report 3. Date incorporated or Qualified 08/20/1993 03/09/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0433491 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ Trust Fund Contribution 23 28 Added to Fees Country This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GOLDFARB, HOWARD Street Address (P.O. Box Number is Not Acceptable) 6521 W. COMMERCIAL BLVD. TAMARAC FL 33319 83 84 City Zip Code 85 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 DATE are, typied or printed han elof registered agout and title if applicative (NOTE: Registered Agent signature required when reinstating) (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE GOLDFARB, HOWARD CR2E034 NAM6 1.2 NAME 7640 SOUTHGATE BLVD STREET ADDRESS 1.3 STREET ADDRESS NORTH LAUDERDALE FL 14 CITY - ST- ZIP DELETE Change Addition DOME 2 1 TITLE WALLACH, WILLIAM NAME 2.2 NAME 7640 SOUTHGATE BLVD STREET ADDRESS 2.3 STREET ADDRESS NORTH LAUDERDALE FL CUY-ST-ZIP 2 4 CITY - S1 - ZIP DV DELETE Change TAT. F 3 1 TiTLE [ Addition WALLACH, ROBERT M NAME 7640 SOUTHGATE BLVD 3.3 STREET ADDRESS SPECEL ADDRESS NORTH LAUDERDALE FL CITY SE 200 3.4 CITY - ST - ZIP DT DELETE THE 4 1 THLE ■ Addition MISZNER, JEFFREY 4.2 NAME Marit 7640 SOUTHGATE BLVD STREET ADDRESS 4.3 STREET ADDRESS NORTH LAUDERDALE FL C-14 S1-7 P 4.4 CITY - ST-ZIP DELETE Change ☐ Addition THEF 5 1 TITLE 0, T NAZAMOODEEN. PHILBERT 5 2 NAME NAME 7640 SOUTHGATE BLVD STREET ACCORESS 5.3 STREET ADDRESS NORTH LAUDERFALE FL 5.4 CITY - ST - ZIP CHY St ZIP BLE DELETE 6 1 TiTLE ☐ Change Addition WILSON, STEVEN M NAME 6 2 NAME 6521 W. COMMERCIAL BLVD. STREET ADDRESS 6.3 STREET ADDRESS TAMARAC FL 33319 CHY-ST ZIE ON CITY-ST-ZIP 14. I do hereby certify that the information supplied certify that the information indicated on this and oath, that I am an officer or director of the conf. In this filing is voluntarily furnished of report or supplemental annual re of and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further report is true and accurate and that my signature shall have the same legal effect as if made under provided to execute this report as required by Chapter 607, Florida Statutes; and that my name ration or the receiver or trust appears in Block 12 or Block 13 if changed ro an attachment with ar

IR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR