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

CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F 1. Corporation Name	93000064266	(8)
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NUNBERG ENTERPRISES, INC.

				_
Principal	Place	of R	ieinaee	

Mailing Address

6919 C DIVIE HAD



MIAMI FL 33		MIAMI FL 33143					
2. Principal Pla	ne of Rusinass				3. Date Incorporated or Qualified 09/10/1993	3a. Date of La 05/30	ast Report 1/1995
21 /330		2a. Mailing Address	100	1. 1.	4. FEI Number		Applied For
Suite, Apt. #		reet 26 /330 No. Suite, Apt. #, etc.	<u>ہ 7 ہے</u>	Treet	65-0448629		Not Applicable
22 City & State		27	··		5. Certificate of Status Desired		3.75 Additional Fee Required
23 Mican	n, Flox	City & State Miani	Flor		Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees
24 33/2	-S 25 (人S	A 33/25	Goun	LS A	8. This corporation has liability for i	ntangible tax und	ers 199.032,
		of Current Registered Agent	[30]	C317	Florida Statutes Yes		
				11 Name	10. Name and Address of New R	egistered Agen	<u> </u>
SIMON,	GARY P	•					
	DADELAND BLVD.		3	Street A	Address (P.O. Box Number is Not Acceptable	e)	
SUITE 5			1	3			
MIAMI FI							
	• •		1	4 City		E1 85	Zip Code
11. Pursuant to	the provisions of Sections	607.0502 and 607.1508, Florida Statu	ites, the above	-named co	rporation submits this statement for the purp	FL OF	ito rogisto
or registere familiar with	o agent, or both, in the Sta n, and accept the oblication	ite of Florida. Such change was author is of, Section 607.0505, Florida Statute	rized by the co	rporation's l	rporation submits this statement for the purp board of directors. I hereby accept the appo	oose of changing intment as regist	its registered office ered agent. I am
SIGNATURE		, vor rooto, i fortus otatute	ug.			_	-
-s	Igriature, typed or printed name of re	istered agent and title II aprilicable. டி	VOTE: Registered A	pont signature re-	Quirea when reinstating)	DATE:	
12.		CERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		CTORS IN 12
TITLE	D	DECETÉ	1.1 TITL	E		X Dha	
NAME	NUNBERG, JEFFREY	/ S	1.2 NAM		•	, (-
STREET ADDRESS	6212 S. DIXIE HWY.		1.3 STRE	ET ADDRESS	1330 NW 1 Street	+-	
CITY - ST - ZIP	MIAMI FL 33143		1.4 CITY	- ST - 2IF	Miami, Florida	33/25	
TITLE		DELETE	2 1 1/16	E		Cnar	
NAME CTOSES ADDRESS			2.2 NAM	i			
STREET ADDRESS			23 STRE	FT ADDRESS			
CITY-ST-ZIP TITLE		FT OFFICE	2.4 CITY				
NAME		☐ DELETE	3 1 TITL			☐ Char	ge 🔲 Addition
STREET ADDRESS			3.2 NAM				
CITY-ST-ZIP				ET ADDRESS			
TITLE	· · · · · · · · · · · · · · · · · · ·	[] DELETE	3.4 CITY				
NAME		[] becen	4. 1 Titei		•	Char	ge 🔲 Addition
STREET ADDRESS			4.2 NAMI				4
CITY-ST-ZIP				T ADDRESS			
TITLE			4.4 CHY- 5. 1 TITLE			F-1	
NAME		L.J. Second	5. THILE 5.2 NAME	1		☐ Chan	ge 🔲 Addition
STREET ADDRESS				T ADDRESS			i
CHTY-ST-ZIP			54 CHY-				
TITLE		DELETE	6 1 TITLE			- Char	no FTI Addition
NAME			6.2 NAME			☐ Chan	ge 🔲 Addition
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			64 City.	\$1.7ID			
14. I do hereby o	certify that the information :	supplied with this filing is voluntarily fun	aighad and da		y for the exemption stated in Section 119.0	7(3)(k) Florida 9+	atitoe I further
oath; that I a appears in B	re miormation indicated on im an officer or director of t Block 12 or Block 13 if char	tirs a inual report or supplemental and the corporation or the receiver or truste near, or on an attachment with an acc	nual report is to se empowered fress.	ue and acci to execute	ly for the exemption stated in Section 119.0 urate and that my signature shall have the si this report as required by Chapter 607, Flor	eme legal effect a ida Statutes; and	is if made under that my name

SIGNATURE: (X)

(305) 324-8600