

FLORIDA DE PARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000024473**1. Corporation Name

DAVID SCHWARTZ COMPANY, INC.

Principal Flace of Business Mailing Address 1428 BRICKELL AVE 1428 BRICKELL AVE				1 10013001 (10 1911) 01011 00111 03111 03111 05111	
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		BTH FL		1/8	
MIAMI FL 33131 MIAMI FL 33131		MIAMI Ft. 33131		DO NOT WRITE IN THIS	SPACE"
				3. Date Incorporated or Qualified	i
2 Principal P	lace of Business	2a. Mailing Address		03/25/1994 4. FEUNUmber	1.10 (
a. runcipairi	idde of Edsiness	} · · ·)		65-0532867	Applied For
Suite, Apt.	# elc	Suite, Apt #, etc		037032007	Not Applicable
a	., 0.0.	27		5. Certif, ale of Status Desired (1	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Emancing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zíp	Country	Zφ	Country	8. This corporation owes the current year In	:
24	25	29	30	Personal Property Tax	í lyes I linn
	9. Name and Address of Curre	nt Registered Agent	· '· .	10. Name and Address of New Registered	Agent
001	WINTS DAVE		81 Namie		
	WARTZ, DAVID		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	PINE TREE DRIVE		The contract of the contract o	the property of the state of th	Ì
# 526			83		ļ
MAN	AI BEACH FL 33140		84 City		85 Zip Code
			Oily	Fl	_ 63 210 COGE
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was a	ithorized by the concerati	ioration submits this statement for the purpose of on's board of directors. Thereby accept the appo	Changing its registured critinent as registered
SIGNATURE					
	Signature, typed or printed name of registered ag-		Registers IA port sopration to pos-		-
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D DAIANT DAIAN	[,] DELETE	11Title	gint properties and properties and a series	[Change [Addition
NAME	SCHWARTZ, DAVID		12 NAME	980002798 -03/05/330	3120-005
STREET ADDRESS	4101 PINE TREE DR., SUITE 5	20	13 SINCET ADDRESS:	***150,00	****150.00
CITY-ST-ZIP TITLE	MIAMI BEACH FL 33140	[] DELETE	14 C/TY-S1 Zir/ 2 1 Till (E	****130,00	
i i		Libereit	1		[Change [Addition
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STREET ADDRESS			23 STREET ADDRESS		j
CITY-ST-ZIP TITLE		[] DELETE	2,4 CHY-57-7P		[Change
NAME		tal pereit	32 NAME		f Louiside [[Wac (0,1)]
STREET ADORESS					1
ſ			3.3 STREET ADDRESS		
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NAME		E. Poeteri	4 2 NAME		[Change [Magneri
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1					
CITY-ST-ZIP TITLE		[] DELETE	4.4 CHY-ST 20F		[Change [Addition
NAME		Elbereit	5.2 NAME		(Louiside (Lyon 10)
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY-\$1, Zie		Į.
TITLE		[] DELETE	617/06		[Change [Addition
NAME		C, I Decent	6.2 NAME		Filomode (Tuetheou
STREET ADDRESS			6 3 STREET ADDRESS		1
OTHER MUNESS			646 (14.56.7)b		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption staded 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 tegal effect as if made under each; 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, with all other like empowered.

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