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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9400072424 (2)**

ERIC L. MELNICOFF, P.A.

Principal Place of Business Mailing Address

6363 NW 6TH WAY SUITE 210 6363 NW 6TH
FT LAUDERDALE FL 33309 FT LAUDERDAL

6363 NW 6TH WAY SUITE 210 FT LAUDERDALE FL 33309



					 Date Incorporated or Qualifit 10/03/1994 	od 3a. Date of Last Report 05/01/1995
2. Principal Place of Business		F-1 "	2a. Mailing Address		4. FEI Number	Applied Far
21			26		65-0524594 Not Applicable	
Suite, Apt. 22	. #, etc.	1			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Country		8. This corporation has liability	for intangible tax under s. 199.032,
24	25	<u> </u>			Florida Statutes 🗹	
	Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		w Registered Agent
				81 Name		
	COFF, ERIC L			82 Street Add	lress (P.O. Box Number is Not Accep	otable)
6363 NW 6TH WAY SUITE 210				Shoot victorias (* 1.5. Exx retained to not viscopitating)		
FT LAU	JDERDALE FL 33309			83		
				84 City		ar 7. O.d.
				1		FL 85 Zip Code purpose of changing its registered office
OF TEGISTE	pred agent, or both, in the State of I with, and accept the obligations of, S Sgradon, types or protect native of registered	Florida: Such change was au Section 607.0505, Florida St	othorized by the clarides.	Comporation's boa	and of directors. Thereby accept the a	purpose or changing its registered omce inpointment as registered agent. I am
12.		AND DIRECTORS	13.	What siled to stale to		DEFICERS AND DIRECTORS IN 12
THE	D	☐ DELETI		TLF [Change Addition
NAME	MELNICOFF, ERIC L		1.2 NA	1		
STREET ADDRESS	AGAG BRIT ATTI MINE CONT.			1.3 STREET ALORESS 1.4 CHY-SI-7IP		
CITY-ST-ZIP						
lifici		DELETI		• • • • • • • • • • • • • • • • • • • •		Change Addition
NAME			2 2 NA	ME		
STREET ADDRESS			2351	REET ADDRESS		
CHY-ST-7IP				(Y-S1-76)		
THUE		DELFTE				Charge Addition
NAM:			3 2 N4	ME		
STREET ADDRESS			33 SI	REET ADDRESS		
CHY-SI-ZIF	1		3401	IY - ST - ZIF		
TITLE		DELETE	4 1 1	TLE.		Change Addition
NAM:			4.2 NA	ME		
STREET ADDRESS			43.51	REET ADOPESS		
CHY-SH-ZIP	1 _		4 4 00	Y - S1 - 21F		
TITLE		☐ DELETE				Change Addition
NAME		DELEFE		Ti E		Change Addition
		DELETE	5 1 TI 5 2 N4	Ti E		Change Addition
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NAME STHEFT ADDRESS CITY-ST-ZIP TITLE NAME		<u>-</u>	5 1 TI 5 2 NA 5 3 S II 5 4 C II	FLE ME REEF AUDRESS Y+ST+ZIP CLE		
NAME STREET ADDRESS CITY-ST-ZIP TITLE		<u>-</u>	5 1 TI 52 N4 53 SII 54 CII 6 1 II	FLE ME REEF AUDRESS Y+ST+ZIP CLE		

4. To 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. Hurther 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:

SIGNATURE AND TYPED OR PHINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/6/96

305 176-1001