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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000031202	(1
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BERENTHAL AND FRIEDMAN, RODRIGUEZ & FERRARO, P.A



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Principal Place o	f Business	Mailing Address							
2300 MIAMI CENTER 201 SO. BISCAYNE BLVD. 2300 MIAMI CENTER 201 SO. BISCAYNE BI MIAMI FL 33131-4329				YNE BLVD.					
MIAMI FL 33131-4329 minmi			186 1 2 00101 1020			3. Date Incorporated or Qualified 3a. Date of Last Report 04/17/1995			Report
2. Principal Plac	of Business	2a. Mailing Addre	988			4. Ft.t Number	J		Applied For
2. FINO(pai Fiac 1	ie or business	26	1			65-05830/D Not Applic			Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	П		5 Additional
2		27							Required
City & State		Fin 1	Oity & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
3	[28]			Country		This corporation has lability for intangible tax under s 199			
·	Zip Country Zip 29		30	<b></b>		Florida Statutes Yes No			
4	g. Name and Address of Curren					10. Name and Address of New R	egistered /	gent	
				81	Name				
RODRIC	GUEZ, FRANK R			82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
2300 M	IAMI CENTER 201 SO. BISCAY	ne blvd.							
MAMI I	FL 33131-4329			83					
			ŀ	84	City			85 2	Zip Code
			]	- 1	•	ation submits this statement for the pur	FL.		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF		DIRECT Change	
12.						ADDITIONS/CHANGES TO OFF			
TITLE	D Berenthal, James L	□ DEC					L	7 0.00.8.	
NAME	575 MADISON AVENUE ST	TF 508	1.2 N		ADDRESS				
STREET ADDRESS	NEW YORK NY 10022	. 2 300			1				
CHY-ST-ZIP TITLE	D			14 CHY-51-ZIF 2 1 TULE			[	Change	e 🔲 Add-tien
NAME	RODRIGUEZ, FRANK R	ட	22 N	AME					
STREET ADDRESS	2300 MIAM! CENTER 201	SO. BISCAYNE BL	<b>VD</b> . 238	2.3 STREET ADD					
CITY-S1-7IP	MIAMI FL 33131-4329		240	IIY-SI	I - ZIF				
TITLE		[] DE	LETE 3 1 T	r'Tu E	7,50		[	Chang	e 🔲 Addition
NAME			32 N	AME	-				
STREET ADDRESS			33.5	STREET	ADDRESS				
CITY-ST-ZIP				IIY - SI	I - ZIP	Change			e 🗍 Additror
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NAME			421						
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NAME					ADDRESS				
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CITY-ST-ZIP				uli tua. Tilluf				Chang	je 🔲 Additio
TITLE				NAME					
NAME CAREET ADDRESS					ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP			■ h 4 i	0-1Y - S	st - ZIF	for the exemption stated in Section 11			

I do hereby certify that the information supplied with this filing is voluntarily furnished and closs not quality for the exemption stated in Section 1997(spill), Fiorida Statutes. I not her certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signalure shall have the same legal effect as if made under cath, that I am an officer or director of the condisation 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-96 305/377-4100