FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF SAMTE.

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000071309 (5)

FREDERICK M. HEIMBERG, P.A.

Principal Place	of Business	Mailing Address	Mailing Address			F 40001100111101010001000000000000000000	: 60 111 1003 1 11 00 0 111	JI 00380 1011 F801
ONE S. OCEAN	I BLVD		ONE SOUTH OCEAN BLVD					
SUITE 304 SUITE 304 BOCA RATON FL 33432 BOCA RATON			5143					
US US						3. Date Incorporated or Qualified	3a. Date of L	ast Report
						09/15/1995 02/20/1996		196
	ace of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number		Applied For
21	N	26				65-0608953		Not Applicable
Suite, Apt. 1		Suite, Apt #, etc.				5, Certificate of Status Desired	F	.75 Additional ee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
		28 Zip	Zip Country			Trust Fund Contribution		dded to Fees
24	25	29		30		B. This corporation has fiability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		
	g. Name and Address of Curr					10. Name and Address of New Re	gistered Agent	
HEIM	MBERG, FREDERICK M		8	1 Name	;			
ONE	S. OCEAN B;VD		82 Street Ad		Addres	ss (P.O. Box Number is Not Acceptab	le)	
1	E 304		L	<u> </u>				
BOC	A RATON FL 33432		8	3				
			8	4 City			85	Zip Code
	007.04	100 L007 4500 E 0					FL "	1
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was	authorized :	by the cor	d corpo rporatio	ration submits this statement for the p in's board of directors. I hereby accep	urpose of chang at the appointme	Jing its registered int as registered
agent. Lar	m familiar with, and accept the obli	gations of, Section 607.0505. F	lorida Statut	es.	,	· .		· <u>-</u>
SIGNATURE Signature typing or printed have of negotiered agent and title Lappicable (NOTE			TF. Danislared f	cont eignatur	re required	I when reinstating)	DATE	
12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	PSD	DELETE	1.1 TITLE		T		☐ Ch	
NAME	HEIMBERG, FREDERICK M		1.2 NAM	Ē				
STREET ADDRESS	ONE S. OCEAN BLVD		1.3 STRE	ET ADDRESS		ī	:	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY		 			
TITLE		☐ DELETE	21 TITLE				∐ Ch	ange
NAME			22 NAME			* ************************************		
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP TITLE	DELE		2. 4 CITY - ST - ZIP 3.1 TITLE		 		☐ Ch	ange
NAME		L) blene	3.1 IIILE 3.2 NAM					ange Im round.
STREET ADDRESS			1	et adoress		1		
CITY-ST-ZIP				'-ST-ZIP				
TITLE		DELETE	4 1 TITLE				☐ Ch	ange Addition
NAME			4 2 NAM	ΙE				
STREET ADDRESS				ET ADDRESS				
CITY - ST - 7IP			4.4 CiTY	- ST-ZIP				
TITLE		☐ DELETE	5 i Title				Ch	ange Addition
NAME			52 NAM	ē	1			
STREET ADDRESS			5 3 STRE	et address				
CITY-ST-ZIP		00.000		-ST-ZIP	 		[] O	1200
TITLE		☐ DELETE	6.1 YITLE				L_ Ch	ange Addition
NAME			6.2 NAM					
STREET ADDRESS				ET ADDRESS	•			
CITY-ST-ZIP	w cortify that the information suppl	ind with this filing does not aua		·ST-ZIP	stated i	in Section 119.07(3)(i), Florida Statutes	e I further certif	v that the
information I am an of	n indicated on this annual report of	r supplemental annual report is or the receiver or trustee empor	true and ac wered to ex-	curate an	id that n	ny signature shall have the same lega as required by Chapter 607, Florida S	I effect as it mad	de under oath: that

SIGNATURE:

Frederik M Hembers

JOHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/97 561-338-7711 Dayline Proces

FILED

Jan 16 1997 8:00am

Secretary of State