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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000088534**

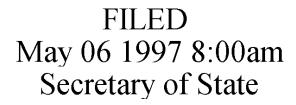
L. ISAACSON, INC.

Principal Place of Business

1221 BRICKELL AVENUE. SUITE 2000

Mailing Address

1221 BRICKELL AVENUE, SUITE 2600





| MIAMI FL 331: US | 31 | MIAMI FL 33131-3219 US | | | | | | | |
|--|---|------------------------------------|---------------|------|--|--|---------------------------------------|----------------|--------------------------|
| | | | | | 3. Date Incorporated or Qualified 11/17/1995 | 3a. Da 04/ | 3a. Date of Last Report 04/30/1996 | | |
| 2. Principal f | Place of Business | 2a. Mailing Address | | | 4. FEI Number | | | Applied For | |
| 21 | 1 · · · · · · · · · · · · · · · · · · · | 26 | | | 65-0625477 | | | Not Applicable | |
| Suite, Apt | #, etc | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | , | 5 Additional Required |
| Oity & Sta | ite | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | 00 May Be led to Fees |
| Ζφ 4 | Country 25 | Z(p 29 | Court 30 | itry | | This corporation has liability for Florida Statutes | intangible Yes [| | er s. 199.032, |
| mi 1 · · · · · · · · · · · · · · · · · · | 9. Name and Address of Cu | | | | | 10. Name and Address of New Re | gistered | Agent | |
| THE | E LAW FIRM OF LAWRENCE J | SPIEGEL CHRTD | [1 | 81 | Name | | | | |
| | ALMERIA AVENUE | | <u> </u> | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | ole) | | |
| COI | RAL GABLES FL 33134 | | - | 83 | | | | | |
| | | | Ĺ | 84 | City | | | 85 | Zip Code |
| | | | ľ | | City | | FL | . 65 | eip code |
| agent Ta | registered agent, or both, in the Sami familiar with, and accept the of | bligations of, Section 607.0505, f | Florida Statu | ıtes |). | ation's board of directors. I hereby acceptions and the second of directors. I hereby acceptions are second or secon | DATE | | t as registered |
| 12. | OFFICERS | AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICE | ERS AND | DIREC | TORS IN 12 |
| ME | PSTD | DELETE | 1.1 TIR | LE | | | | Char | nge 🔲 Addition |
| NAME | ISAACSON, LAURENCE S | | 1.2 NAM | ME | · | | | | |
| STREET ADDRESS | | SUITE 2600 | 1.3 STR | REFT | ADDRESS | | | | |
| CITY - ST - ZIP | MIAMI FL. | | 1.4 CiT | Y-S | T - ZIP | | | | 1 |
| TILF | VP ISAACSON, LORI I | ☐ DELETE | 2.1 TITL | | | | | Char | ge [_] Addition |
| NAMI | 200 REDEADO AVE | | 2.2 NAM | | | | | | |
| STREET ADDRESS | FT LADUERDAEL FL | | 1 | | ADDRESS | | | | |
| CHY-ST-ZIP TILE | II DESCRIPTET T | DELETE | 2. 4 CH | | ST · ZiP | | | Char | ige Addition |
| NAME | | [| 3 2 NAM | | | | | | .go |
| SURELI ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CIT | TY-S | ST-ZIP | | | | |
| HILF | | DELETE | 4.1 TIT | | | | | Char | ge 🔲 Addition |
| NAME | | | 4 2 NA | ME | | | | | |
| STREET ADDRESS | | | 4.3 STR | REET | ADDRESS | | | | |
| CHY-ST ZiP | | T pereze | 4 4 CIT | | T-ZIP | | | -1 & :: | |
| lilt# | | [] DELETE | 5 1 T)T) | | | | | Char | ige Addition |
| NAME | | | 52 NA) | | ADDAFOD | | | | |
| STREET ADORESS | | | | | ADDRESS | | | | |
| CHY-51-20F THE | | DELETE | 5.4 CIT | | 1-212 | | | Char | nge Addition |
| NAME | | Special property 1 to | 6.2 NA | | | | | | |
| STIGHT ADORESS | | | | | ADDRESS | | | | |
| COTY - ST7IP | | | 6.4 CIT | | | | | | |

14. Ldb hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

his CAURGINGS ISAACSON \$\$/28/97 (305)536-1410