

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P96000057419 (9)**

1. Corporation Name

GREENBERG GROUP, INC.

Principal Place of Business

3129 CECELIA DRIVE
APOPKA FL 32703

Mailing Address

3129 CECELIA DRIVE
APOPKA FL 32703-7815

2. Principal Place of Business

21

2b. Mailing Address

26

Suite, Apt. #, etc.

22

27

City & State

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Zip

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Country

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29

Zip

27

30

Country

9. Name and Address of Current Registered Agent

**GREENBERG, ANDREW W D.D.S.
3129 CECELIA DRIVE
APOPKA FL 32703**

3. Date Incorporated or Qualified 07/05/1996	3a. Date of Last Report
4. FEI Number 59-3391290	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	
61 Name	
62 Street Address (P.O. Box Number is Not Acceptable)	
63	
64 City	FL
65 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	<input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREENBERG, ANDREW W D.D.S.		
STREET ADDRESS 3129 CECELIA DRIVE		
CITY-ST-ZIP APOPKA FL 32703		
TITLE D	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREENBERG, SUSAN R		
STREET ADDRESS 3129 CECELIA DRIVE		
CITY-ST-ZIP APOPKA FL 32703		
TITLE	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do 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.

SIGNATURE: *Andrew Greenberg* **URID**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 28, 1997

Date

Daytime Phone #

CR2E034 (9/96)