

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

1

PROOF OF FILING
CORPORATION
ANNUAL REPORT
1998
FLORIDA DEPARTMENT OF STATE
J. M. McPherson
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB 16 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000081107

1. Corporation Name

KOBRIN + KOBRIN, INC.

Principal Place of Business

Mailing Address

3725 NE 163 ST.

3725 NE 163 ST.

No. MIAMI BEACH, FL 33160

No. MIAMI BEACH, FL 33160

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
23 City & State	27 City & State
24 Zip	28 Zip
25 Country	29 Country
30	

3. Date Incorporated or Qualified	10-1-96
4. FEI Number	65-0069847
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 owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

MARTIN H. ALMAN
172 90 NE 19 AVE
No. MIAMI BEACH, FL 33162

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (PO Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE *Martin H. Alman* DATE *2/5/98*
Signature (typed or printed name of registered agent and date of appointment) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	ASTD	<input type="checkbox"/> DELETE
NAME	LEV KOBRIN	
STREET ADDRESS	3199 SO. OCEAN DR. #402E	
CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *Lev Kobrin* DATE: *2/5/98*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE
305-949-7500

CR2E034 (10/97)

2

KOBRIN & KOBRIN, INC.
3725 N.E. 163rd St.
North Miami Beach, FL 33160

Re-instatement Department
Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

re: Annual Report 1997 & 1998
Kobrin & Kobrin, Inc.
P96000081107


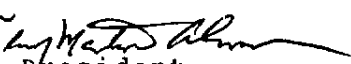
Gentlemen:

We are enclosing our check for \$315.00, together with a 1998 Annual Report Form. Please reinstate this corporation to current status. The corporation moved it's location from Hollywood, FL to North Miami Beach, as you can see on the Annual report form. Also, the principal who was receiving the corporate mail is no longer associated or affiliated with the corporation. He was evidently throwing away the mail rather than forwarding it to the remaining officer. Therefore we were never advised that the corporation has been dissolved.

The new corporate business address and mailing address is shown on the form, as is the name, address and signature of the new current resident agent.

Thank you for your attention to this matter.

Your truly,

Lev Kobrin, President
Kobrin & Kobrin, INC.