

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

FILED
Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000011174 (4)

1. Corporation Name

LAW OFFICES OF DAVID A. FINKELSTEIN, P.A.



Principal Place of Business

Mailing Address

1065 94TH STREET
SUITE 105
BAY HARBOR ISLAND FL 33154

1065 94TH STREET
SUITE 105
BAY HARBOR ISLAND FL 33154

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5660 Collins Ave
Suite, Apt. #, etc.

22 16 C

City & State

23 Miami Beach, FL

24 33140

25 USA

2a. Mailing Address

26 P.O. Box 403326
Suite, Apt. #, etc.

27 16 C

City & State

28 Miami Beach, FL

29 33140

30 USA

3. Date Incorporated or Qualified

01/31/1997

4. FEI Number

65-0816509

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FINKELSTEIN, DAVID A
1065 94TH STREET
SUITE 105
BAY HARBOR ISLAND FL 33154

10. Name and Address of New Registered Agent

81 Name

David Finkelstein

82 Street Address (P.O. Box Number is Not Acceptable)

5660 Collins Ave 16C

83 #16 C

84 City

Miami Beach

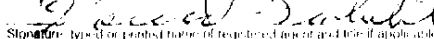
FL

85 Zip Code

33140

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



(NOTE: Registered Agent's signature required when reinstating)

DATE

3/5/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME FINKELSTEIN, DAVID A
STREET ADDRESS 1065 94TH STREET, SUITE 105
CITY-ST-ZIP BAY HARBOR ISLAND FL 33154

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Finkelstein, David, A
1.3 STREET ADDRESS 5660 Collins Ave #16C
1.4 CITY-ST-ZIP Miami Beach, FL 33140

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

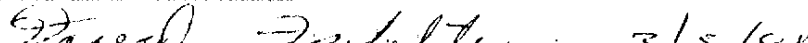
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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



CR2E034 (10/97)