Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90079 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000034886

1. Corporation Name

GREENBERG BROTHERS, INC.

GINEEIND	eria bila mena,							
Principal Place	e of Business	Mailing Address			ı (Ağı)(dat tin ilite) (dir) a	8131 48 114 88 141 88 11	18 (1111 - 1194) (818) 1	
150 N. FEDERAL HIGHWAY SUITE 210 FORT LAUDERDALE FL 33301 150 N. FEDERAL HIGHWAY SUITE 210 FORT LAUDERDALE FL 33301					DO NOT	WRITE IN THE	S SPACE	
					04/16/1998			
Principal Place of Business To a serious seri		2a. Mailing Address			4. FEI Number 0862	405	<u> </u>	olied For Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desir	ed 🗆	\$8.75 A	1	
City & Stat	e	City & State			Election Campaign Finan Trust Fund Contribution		\$5.00 r Added to	
Zip 24	Country 25	Zip 30	Country	· 	This corporation owes the Personal Property Tax.		Yes	□No
	9. Name and Address of Curre	nt Registered Agent	- 04		10. Name and Address of N	lew Registered	1 Agent	
GREENBERG, JEFFREY S 150 N. FEDERAL HIGHWAY SUITE 210			81	L	e at Address (P.O. Box Number is Not Acceptable)			
			83					
FOR	T LAUDERDALE FL 33301		84	City			85 Zip C	ode
SIGNATURE	Signature, types of printed name of registered age. OFFICERS AI	ent and title if applicable (NOTE: Re ND DIRECTORS	egistered Ager	nt signature req	uired when reinstating) ADDITIONS/CHANGES TO	DATE O OFFICERS A	AND DIRECTO	R\$ IN 12
TITLE		☐ DELETE	1.1 TITLE	1	resident.		Change	Addition
NAME			1.2 NAME		Jeffrey S. Unec	vberg,	.	1-2-10
STREET ADDRESS			1.3 STREET	TADDRESS	so North Federa	1 Highw	ay, Sur	te210
CITY-ST-ZIP		T ocuse	1.4 CITY- S	T-ZIP	fort Lauderdale	FE	Change	Addition
TITLE		☐ DEFELE	2.1 TITLE		·		change	
NAME			2.2 NAME 2.3 STREET	TANNESS				
STREET ADDRESS CITY-ST-ZIP			2.4 CITY-5		•	~ ·	···	
TITLE		Closuste	3.1 TITLE				Change	Addition
NAME		☐ DELETE		1				
STREET ADDRESS		C) DELETE	3.2 NAME	- 1				1
CITY-ST-ZIP		[] bereie		TADDRESS				
TITLE			3.3 STREE				Change	Addition
NAME		☐ DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE				Change	Addition
			3.3 STREE 3.4. CITY-S 4.1 TITLE 4.2 NAME	ST-ZIP			Change	Addition
STREET ADDRESS			3.3 STREE 3.4. CITY-S 4.1 TITLE 4. 2 NAME 4.3 STREE	T ADDRESS			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE			3.3 STREE 3.4. CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS			☐ Change	Addition
CITY-ST-ZIP		□ ØELETE	3.3 STREE 3.4. CITY- 5 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5 5.1 TITLE 5.2 NAME	T ADDRESS T-ZIP				
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CITY-ST-ZIP TITLE NAME		☐ DELETE	3.3 STREE* 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE* 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE* 5.4 CITY-S	T ADDRESS T. ZIP T ADDRESS	,		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		□ ØELETE	3.3 STREE* 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE* 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE*	T ADDRESS T. ZIP T ADDRESS				

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 2

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR