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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23820

L. ROSENBERG MANAGEMENT, INC.

FILED Feb 19, 1999 8:00am Secretary of State

02-19-1999 90047 011 ***150.00



4000 ISLAND #2602 N. MIAMI BCH US		4000 ISLAND BLVD. #2602 N MIAMI BCH. FL 33160 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/08/1991					
7	Place of Business	2a. Mailing Address					FEI Number			Ap	plied For	
Suite A-4 #		26					65-0239416		<u> </u>	+ -	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				- 1	Certifcate of Status Desired			75 <i>A</i>	dditional quired	
City & State		City & State					Election Campaign Financing	-				
3		28					Trust Fund Contribution				May Be	
Zip	Country Zip (Country			This corporation owes the cur			aea (o Fees	
4	25	29				[·	Personal Property Tax.		ngibie ∏Yes		M No	
	Name and Address of Current I	Registered Agent	,				Name and Address of New				AL INO	
	MODY 0401/50 TELLING			81	Nam			rogistored A	gent			
HORNSBY, SACHER, ZELMAN & STANTON, P.A. 1110 BRICKELL AVENAUE				82	Stree	et Address (P.0	O. Box Number is Not Accept	able)	<u> </u>			
	THOUSE						T-1.					
N. M	IIAMI BEACH FL 33160		L								,	
				84	City			FL	85	Žip C	ode	
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 ar	od title if applicable (NOTE	· Dociment of		-1							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered 12. OFFICERS AND DIRECTORS 13.					signature			DATE				
TILE			1.1 TITL	£		T	DDITIONS/CHANGES TO OF					
AME	POSENIREDO LINIDA			1.2 NAME					Char	nge	Addition	
TREET ADDRESS										ļ		
ITY-ST-ZIP	4000 ISLAND BLVD #2602 NORTH MIAMI BCH. FL				REET ADDRESS						1	
ITLE	TOTAL PROPERTY	· DELETE	1.4 CITY		ZIP	 			_			
AME							1	l	Chan	ge	☐ Addition	
TREET ADDRESS			2.2 NAM			ļ						
ITY-ST-ZIP				STREET ADDRESS		·					1	
TLE		☐ DELETE	2. 4 CITY		ZIP	-	<u> </u>				-	
AME		☐ DELETE	3.1 1111.1					{	Chan	ge	☐ Addition	
TREET ADDRESS			3.2 NAM								ļ	
TY-ST-ZIP			3.3 STR	EET AL	DDRESS							
TLE			3.4. CITY		ZIP		<u> </u>					
ME		☐ DELETE	4.1 TITLE						Chan	ge	Addition	
TREET ADDRESS			4. 2 NAJ									
			4.3 STR		DDRESS							
TY-ST-ZIP			4.4 CITY		IP.							
ME			5.1 TITLE						Chang	ge	Addition	
1			5.2 NAME]						
REET ADDRESS			5.3 STRE								ł	
TY-ST-ZIP			5.4 CITY-		IP.							
LE		☐ DELETE	6.1 TITLE					Ε	Chang	je	Addition	
ME		•	6.2 NAME									
REET ADDRESS			6.3 STRE	ET AD	DRESS			•				
Y-ST-ZIP			6.4 CITY-	\$T-ZI	IP				•			

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.

SIGNATURE: Funda

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/99

Daytime Phone #

00014474000