

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED
AND
FILED

1997 AUG -5 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S58598 (1)

1. Corporation Name
66-15 TRAFFIC AVENUE CORP.



Principal Place of Business POST OFFICE BOX 26323 TAMARAC FL 33320	Mailing Address POST OFFICE BOX 26323 TAMARAC FL 33320
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip Country	Zip Country
24	29
25	30

3. Date Incorporated or Qualified 06/11/1991	3a. Date of Last Report 04/25/1996
4. FEI Number 65-0274721	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**B & C CORPORATE SERVICES, INC.
201 S. BISCAYNE BLVD.
MIAMI CENTER, SUITE 3000
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name **DAVID PINCHEUSKY**

82 Street Address (P.O. Box Number is Not Acceptable)
5701 N. Pine Island Rd.

83 **Suite 250**

84 City **Tamarac** FL 85 Zip Code **33321**

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 *DAVID PINCHEUSKY* **DAVID PINCHEUSKY** DATE **7/22/97**

JAY S. EISENBERG **JAY S. EISENBERG** DATE **8/16/97**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	EISENBERG, JAY S.
STREET ADDRESS	5701 N. PINE ISLAND RD.
CITY-ST-ZIP	FT. LAUDERDALE FL
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	700002263207
2.3 STREET ADDRESS	-08/11/97--01081--008
2.4 CITY-ST-ZIP	***165.00 ***165.00
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	

JAY S. EISENBERG **JAY S. EISENBERG** DATE **8/16/97**

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.

CR2E034 (4/97)

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THE EISENBERG GROUP OF COMPANIES

5701 North Pine Island Road • Suite 250 • Fort Lauderdale, Florida 33321
Mailing Address: P.O. Box 26323 • Fort Lauderdale, Florida 33320
Telephone: (954) 720-5558 • Facsimile: (954) 720-5545

July 18, 1997

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: 1997 Profit Corporation Annual Report
Document No.: P93000026822 (5)
Document No.: K09657 (3)
Document No.: K09662 (3)
Document No.: S58598 (1)

Dear Sir/Madam:

Reference is made to the above mentioned four entities. With regard to these items please be advised that we had paid these items on January 3, 1997; however, the checks have not yet cleared the bank. I am aware from a previous experience that there was a problem in the State's offices where many of the documents received were not processed or destroyed in error. Please be advised that the above were paid as follows:

- Document No.: P93000026822 (5) paid on 1/3/97 check #548 for \$165.
- Document No.: K09657 (3) paid on 1/3/97 check #860 for \$165.
- Document No.: K09662 (3) paid on 1/3/97 check #1888 for \$165.
- Document No.: S58598 (1) paid on 1/3/97 check #1011 for \$165.

Further, please be advised that we have stopped payment on the above four checks and enclosed please find four new checks each for \$165.00.

Further, I respectfully request that your office accept the \$165 fee as full payment of the items due since we did comply with the law, rules and regulations for a timely filing. Unfortunately, the paperwork was not processed which appears to be no fault of ours.

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Please process the enclosed and if you have any questions please do not hesitate to contact the undersigned.

Very truly yours,



Jay S. Eisenberg

encl.

Via: Certified Mail
Return Receipt Requested
Item No.: P 054 123 122