## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	996 DIVISION OF CORPORATIONS						
DOCUM 1. Gorporation I	Name	17 (4)					
DAVID (	C. FINE, P.A.				A DOCUMENTO DIO COMO ÉGICE MATRICO.	AMAI AKAKI AIAM BIAM ANJAK	A1811 B1812 1981
Principal Place o	f Business	Mailing Address			a tadinana nim danca adian ceasa debit	4881 A1811 A1811 E1811 A1811	Albit Blatt haar
9495 SW 72 S	TREET	9495 SW 72 STREET	9495 SW 72 STREET STE - 230				
STE - 230 MIAMI FL 33173		STE - 230 MIAMI FL 33173				3a. Date of Last Re	
US		US			3. Date Incorporated or Qualified 07/26/1991	04/24/19	
2. Principa! Plac	pe of Business	2a. Mailing Address			4. FEI Number	LI	Applied For
21		26			65-0273561		Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.	<del>,</del>		5. Certificate of Status Desired		Additional Required
City & State		City & State			6. Election Campaign Financing	\$5.0	<b>0</b> May Be
23		28	<del></del>		Trust Fund Contribution		d to Fees
Zip 24	Country 25	Zip <b>29</b>	Gounti 30	ry	8. This corporation has liability for Florida Statutes Yes	intangible tax under s No	199.032,
241	9. Name and Address of Curr		[30]		10. Name and Address of New R		
			В	1 Name			
FINE, DA			В	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
9495 SW STE - 23	72 STREET		8	3			
MIAMI FL 33173			<b>84</b> City			105 7	ıp Code
			-	1	ration submits this statement for the pu	FL   "	
familiar with SIGNATURE	n, and accept the obligations of, Se algorithm, typed or printed name of registered ag	ent and title if applicable (No.	S. OTE: Registered Aç	gent signature require		DATE	
12.	OFFICERS A	ND DIRECTORS	13.	F	ADDITIONS/CHANGES TO OFF	Change	Add tion
NAME	FINE, DAVID C.		1.2 NAM				-
STREET ADDRESS	9495 SW 72 STREET / STE	- 230	1.3 STRE	EET ADORESS			
CITY-ST-ZIP	MIAMI FL	☐ DELETE		-ST-ZIP		Change and Change	☐ Addition
TITLE	Ŭ DE		2 1 TITLE 2 2 NAME			☐ Change	☐ Modition
NAME STREET ADDRESS				EET ADDRESS			
CITY-ST 7IP				-ST-7IP			
THLE		☐ DELETE	3 1 TITL			Change	☐ Addition
NAME			3 2 NAM	<b>I</b>			
STREET ADDRESS			1	EET ADDRESS (-ST-ZIP			
CHY-SI-ZIP TIFLE		DELETE	4.11111			☐ Change	Addition
NAME		_	4.2 NAV	AE			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY - ST - 7IP		ET DELETE		(-ST-ZIP		Change	Addition
THILE	DELETE		5 1 TITS 52 NAM			C out ide	☐ vaoidoti
NAME STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIF				Y-ST-ZIP			
TITLE		☐ DELETE	6. 1 T(T			☐ Char ge	Addition
NAME .			6 2 NAN	ME .			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP	, partify that the information consili	ad with this filing is voluntarily for	6.4 Offi	Y-S1-ZIP loes not qualify	for the exemption stated in Section 119	.07(3)(k), Florida Stati	utes. I further
certify that	the information indicated on this a	nnual report or supplemental an	inual report is	true and accur	rate and that my signature shall have the	same legal effect as	if made under

David C. Fine 4/25/96 (305) 273-6060

ICER OR DIRECTOR

Date

Date