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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra S. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V39458

(7)

FILED Mar 18 1998 8:00am Secretary of State

COOPI	ER-HOROWITZ OF FLORIDA	A, INC.							
Principal Piac	ce of Business	Mailing Address				- 10011 011000 11178 1031 81001 01181 10	II BUTH #IDII		
1111 LINCOL	N ROAD	1111 LINCOLN ROAD							
SUITE 800 SUITE 800						DO NOT WRITE	IN THIS	CDACE	
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 US						3. Date Incorporated or Qualified	, IN THIS C	3FAUL	··········
						05/28/1992			
2. Principal I	Place of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26			65-0341623		No.	ot Applicable	
Suite, Apt	.#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & Sta	te	City & State				6. Election Campaign Financing			equired
23	•	28				Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has pa	id the cur		
24	25	29	30			Personal Property Tax due June			□ No
	g, Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered	Agent	
)WARD, EUGENE			81	Name				
	11 LINCOLN ROAD			62	Street Addre	ss (P.O. Box Number is Not Acceptab	ole)		
	HTE 800			83					
MI	AMI BEACH FL 33139			53					
				64	City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Sta	tutes the a	bove-	named corpo	ration submits this statement for the r		t changing it	te registered
agent. I a	am familiar with, and accept the oblig				t eignature required	ration submits this statement for the points board of directors. I hereby access	DATE	Olitiment as	ragistereo
12.		D DIRECTORS	13.	O AGEN	e alignature required	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	D	DELETE	1,1 T0	TLE		ADDITIONO/OFF ATGLE TO OFF TO	<u> </u>	☐ Change	Addition
NAME	HOROWITZ, DAVID		1.2 N	AME				_	
STREET ADDRESS	1111 LINCOLN ROAD, #800		1.3 \$1	TREET A	DDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CI	ITY-51-	- ZIP				
TITLE	D	☐ DELETE	2.1 TI	TLE				Change	Addition
NAME	HOROWITZ, JEFFREY		2.2 N	AME					
STREET ADDRESS	1111 LINCOLN ROAD, #800		2.3 \$1	TREET A	DDRESS		5.		
CITY-ST-ZIP	MIAMI BEACH FL 33139	T prietr		ITY-ST	-ZIP			F-1 01	T Address
TITLE	UODOWITZ DODEDT	☐ DELETE	3.1 70					Change	Addition
NAME CENTER ADDRESS	HOROWITZ, ROBERT 1111 LINCOLN ROAD, #800			3.2 NAME 3.3 STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	MIAMI BEACH FL 33139								
TITLE	D DENOTIFE 33138	DELETE	3.4. C 4.1 Tu	ITY-ST-	- 214			Change	Addition
NAME	HOROWITZ, RICHARD	C Descrit	4.1 M					- Vikingo	Padicion
STREET ADDRESS					DDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139			TY-ST-		•			
TITLE		☐ DELETE	5.1 Ti					Change	Addition
NAME			5.2 N/	AME				-	
STREET ADDRESS		•			DORESS				
CITY-ST-ZIP				TY-ST-					
TITLE		DELETE	6.1 TI	TLE				Change	Addition
NAME			62 N	AME					
STREET ADDRESS			6.3 ST	REET AL	DDRESS				
CITY-ST-ZIP				TY-\$1-					
	certify that the information cumplied u								

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: V 3

3/4/58