


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

FILED

Feb 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>V55598</b> (9)			
1. Corporation Name <b>SIMPSON'S ESTATE BUYING, INC.</b>			
Principal Place of Business <b>11401 PINES BLVD SUITE 270 PEMBROKE PINES FL 33026</b>		Mailing Address <b>11401 PINES BLVD SUITE 270 PEMBROKE PINES FL 33026-4104</b>	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified <b>08/03/1992</b>		3a. Date of Last Report <b>04/04/1996</b>	
4. FEI Number <b>65-0341938</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent <b>SILBERGLEIT, DAVID 3467 NE 163 STREET NORTH MIAMI BEACH FL 33180</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 <b>2910 oakwood Blvd</b> 84 City <b>N Hollywood</b> FL 85 Zip Code <b>33120</b>	
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
12. OFFICERS AND DIRECTORS			
TITLE	DP <input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	ZIMMERMAN, BERNARD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	11401 PINES BLVD STE 270	1.2 NAME	
CITY-ST-ZIP	PEMBROKE PINES FL	1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE	DVP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATALON, JACK	2.2 NAME	
STREET ADDRESS	11401 PINES BLVD STE 270	2.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL	2.4 CITY-ST-ZIP	
		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY-ST-ZIP	
CITY-ST-ZIP		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
TITLE	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
NAME		4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP		5.2 NAME	
		5.3 STREET ADDRESS	
TITLE	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Bernard Zimmerman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)