

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # V58486

(4)

1. Corporation Name

ABRAHAM/TAMPA, INC.

95 MAY -1 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139

1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/10/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0363088

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 6600 S.W. 57TH AVE

26 6600 S.W. 57TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

Country

Zip

Country

24 33143

25

29 33143

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANIELS, NICHOLAS M.
1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139

81 Name

BRYER, WARREN

82 Street Address (P.O. Box Number is Not Acceptable)

6600 S.W. 57TH AVE

83

84 City

MIAMI

FL

85 Zip Code

33143

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

Warren Bryer

WARREN BRYER

4-25-95

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

ABRAHAM, ANTHONY

STREET ADDRESS

4181 SW 8 ST

CITY - ST - ZIP

MIAMI FL

TITLE

D

NAME

ABRAHAM, THOMAS T.

STREET ADDRESS

6600 SW 57 AVE

CITY - ST - ZIP

MIAMI FL

TITLE

D

NAME

MALOUF, THOMAS H.

STREET ADDRESS

3109 MOSS DALE LANE

CITY - ST - ZIP

TAMPA FL

TITLE

AS

NAME

BRYER, WARREN

STREET ADDRESS

6600 SW 57TH AVE

CITY - ST - ZIP

MIAMI F

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Warren Bryer

4-25-95

305-442-1000

(Signature and typed or printed name of signing officer or director)

Date

Chapter 607, Florida Statutes