

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

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Mar 19 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 # 601813 (9)

1. Corporation Name  
HERSHMAN & HERSHMAN, P.A.



Principal Place of Business Mailing Address  
11479 S.W. 40TH STREET MIAMI FL 33165  
11479 S.W. 40TH STREET MIAMI FL 33165-3311

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/29/1969	3a. Date of Last Report 04/14/1996
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. FEI Number 59-1299464	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	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 HERSHMAN, LLOYD 11479 BIRD ROAD MIAMI FL 33165	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code
	Kenneth Hershman MD 11479 SW 40 ST MIAMI FL 33165

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent to that in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of Section 607.0505, Florida Statutes.  
SIGNATURE: *[Signature]* DATE: 2/15/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	HERSHMAN, LLOYD 11479 BIRD ROAD MIAMI FL	1.1 TITLE P	Kenneth Hershman MD
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	11479 SW 40 ST (Bird Road)
CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	MIAMI FL 33165
TITLE S	LOPEZ, MARIA 11479 BIRD ROAD MIAMI FL	2.1 TITLE VP	Lloyd Hershman MD
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	11479 SW 40 ST (Bird Road)
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	MIAMI FL 33165
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

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 contained herein as an 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, changed, or on an attachment with an address.  
SIGNATURE: *[Signature]* DATE: 2/15/97 (305) 221-7235

CR2E034 (9/96)