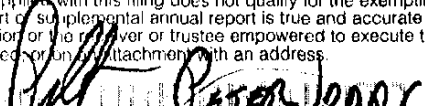


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 28 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 # 602903 (7) 1. Corporation Name PERLESS, ROTH, JONAS & HARTNEY, C.P.A.'S, P.A.			
Principal Place of Business 8370 W. FLAGLER STREET #125 MIAMI FL 33144		Mailing Address 8370 W. FLAGLER STREET #125 MIAMI FL 33144-2078	
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 06/24/1971		3a. Date of Last Report 04/17/1996	
4. FEI Number 59-1352076		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			
9. Name and Address of Current Registered Agent PERLESS, ROBERT 8370 W. FLAGLER STREET #125 MIAMI FL 33166		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE NAME ROTH, ROBERT STREET ADDRESS 8370 W. FLAGLER ST #125 CITY-ST-ZIP MIAMI FL	1.1 TITLE ☐ Change ☐ Addition	
TITLE	PD ☐ DELETE NAME PERLESS, ROBERT N STREET ADDRESS 8370 W. FLAGLER ST #125 CITY-ST-ZIP MIAMI FL	1.2 NAME	
TITLE	VD ☐ DELETE NAME JONAS, PETER STREET ADDRESS 8370 W. FLAGLER ST #125 CITY-ST-ZIP MIAMI, FL 00000	1.3 STREET ADDRESS	
TITLE	☐ DELETE	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE ☐ Change ☐ Addition	
TITLE	☐ DELETE	2.2 NAME	
TITLE	☐ DELETE	2.3 STREET ADDRESS	
TITLE	☐ DELETE	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE ☐ Change ☐ Addition	
TITLE	☐ DELETE	3.2 NAME	
TITLE	☐ DELETE	3.3 STREET ADDRESS	
TITLE	☐ DELETE	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE ☐ Change ☐ Addition	
TITLE	☐ DELETE	4.2 NAME	
TITLE	☐ DELETE	4.3 STREET ADDRESS	
TITLE	☐ DELETE	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE ☐ Change ☐ Addition	
TITLE	☐ DELETE	5.2 NAME	
TITLE	☐ DELETE	5.3 STREET ADDRESS	
TITLE	☐ DELETE	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE ☐ Change ☐ Addition	
TITLE	☐ DELETE	6.2 NAME	
TITLE	☐ DELETE	6.3 STREET ADDRESS	
TITLE	☐ DELETE	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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 2/21/97 (305) 574-1660	

CR2E034 (9/96)