

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J18584 (9)**

1. Corporation Name

ALAN RICHARD SIMON LAW OFFICE CHARTERED ATTORNEY



Principal Place of Business

Mailing Address

2255 GLADES N
SUITE 226-ATRIUM
BOCA RATON FL 33431-7305
US

2255 GLADES RD.
SUITE 226-ATRIUM
BOCA RATON FL 33431-7305
US

2. Principal Place of Business

2a. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**SIMON, ALAN RICHARD
2255 GLADES RD.
SUITE 226-ATRIUM
BOCA RATON FL 3341-7305**

3. Date Incorporated or Qualified

06/10/1986

3a. Date of Last Report

05/16/1995

4. FEI Number

59-2205323

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

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 607.0702 and 607.1506, 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 607.0706, Florida Statutes.

SIGNATURE

Signature of the person who is to be the registered agent

Signature of Registered Agent (signature required)

Date

12. OFFICERS AND DIRECTORS

12.1	C	<input type="checkbox"/> DELETE
12.2	SIMON, ALAN RICHARD	
12.3	2255 GLADES RD., SUITE 226-ATRIUM	
12.4	BOCA RATON FL	
12.5	D	<input type="checkbox"/> DELETE
12.6	SIMON, ALAN RICHARD	
12.7	2255 GLADES RD., SUITE 226-ATRIUM	
12.8	BOCA RATON FL	
12.9	PST	<input type="checkbox"/> DELETE
12.10	SIMON, JEANE KRAMER	
12.11	2255 GLADES RD., SUITE 226-ATRIUM	
12.12	BOCA RATON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	1.2 NAME	
13.3	1.3 STREET ADDRESS	
13.4	1.4 CITY-STATE-ZIP	
13.5	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	2.2 NAME	
13.7	2.3 STREET ADDRESS	
13.8	2.4 CITY-STATE-ZIP	
13.9	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	3.2 NAME	
13.11	3.3 STREET ADDRESS	
13.12	3.4 CITY-STATE-ZIP	
13.13	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	4.2 NAME	
13.15	4.3 STREET ADDRESS	
13.16	4.4 CITY-STATE-ZIP	
13.17	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18	5.2 NAME	
13.19	5.3 STREET ADDRESS	
13.20	5.4 CITY-STATE-ZIP	
13.21	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.22	6.2 NAME	
13.23	6.3 STREET ADDRESS	
13.24	6.4 CITY-STATE-ZIP	

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 119.07(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. 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 in an attachment with address.

SIGNATURE:

Alan Richard Simon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96

407-241-1110

Date

Daytime Phone

CR2E034 (12/95)