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Feb 14 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 # P93000061691 (0)

1. Corporation Name
SALE & KUEHNE, P.A.



Principal Place of Business

100 S.E. 2ND STREET
STE. 2100
MIAMI FL 33131-2154
US

Mailing Address

100 S.E. 2ND AVENUE
STE. 2100
MIAMI FL 33131-1502
US

3. Date Incorporated or Qualified 09/02/1993
3a. Date of Last Report 01/30/1996

2. Principal Place of Business

21 100 S.E. 2nd Street

2a. Mailing Address

26 100 S.E. Second Street

4. FEI Number 65-0433607
Applied For Not Applicable

22 STE 3550

27 Ste 3550

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 Miami FL

28 Miami FL

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 33131-2154 25 U.S.

29 33131-2154 30 U.S.

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TROP, MICHAEL L ESQ
200 EAST LAS OLAS BLVD.
STE. 1900
FT LAUDERDALE FL 33301

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME SALE, JON A
STREET ADDRESS 100 S.E. 2ND STREET, STE. 2100
CITY-ST-ZIP MIAMI FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS 100 S.E. Second St., Ste 3550
1.4 CITY-ST-ZIP

TITLE SVP
NAME KUEHNE, BENEDICT P
STREET ADDRESS 100 S.E. 2ND STREET, STE. 2100
CITY-ST-ZIP MIAMI FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS 100 S.E. Second St., Ste 3550
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
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: Benedict P. Kuehne Benedict P. Kuehne 1/15/97 (305) 789-5989
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)