

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000063632 (1)**

1. Corporation Name

**E.F. HUTTON CORPORATION**



Principal Place of Business

2000 SO. DIXIE HIGHWAY  
SUITE 100  
MIAMI FL 33133

Mailing Address

2000 SO. DIXIE HIGHWAY  
SUITE 100  
MIAMI FL 33133

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc

26

Suite, Apt. #, etc

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

ABBASSI, RAY  
2000 SO. DIXIE HIGHWAY  
SUITE 100  
MIAMI FL 33133

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 607.0629 and 607.1604, 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. Thereby accepting the appointment as registered agent, I am familiar with, and accept the obligations of Section 607.0603, Florida Statutes.

SIGNATURE

*[Signature]*

*[Signature]*

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	ABBASSI, RAY	
STREET ADDRESS	2000 SO. DIXIE HIGHWAY #100	
CITY, ST, ZIP	MIAMI FL 33133	
TITLE	V	DELETE
NAME	ABBASSI, ALI R	
STREET ADDRESS	2000 SO. DIXIE HIGHWAY #100	
CITY, ST, ZIP	MIAMI FL 33133	
TITLE	ST	DELETE
NAME	KITTS, KATHI L	
STREET ADDRESS	2000 SO. DIXIE HIGHWAY #100	
CITY, ST, ZIP	MIAMI FL 33133	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Change	Addition
12 NAME		
13 STREET ADDRESS		
14 CITY, ST, ZIP		
21 TITLE	Change	Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP	Change	Addition
31 TITLE		
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP	Change	Addition
41 TITLE		
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP	Change	Addition
51 TITLE	Change	Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE	Change	Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, 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 is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. But I am an officer or director of the corporation, or a shareholder or transferee provided to exercise the right provided by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on any document with an address.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]* (305) 936-5958

CR2E034 (12/95)