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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9500004921 (9)

CHRISTOPHER P. KELLEY, P.A.

11098 BISCAYNE BLVD SUITE #205 MIAMI FL 33161			Malling Address					•		
			11098 BISCAYNE BLVD Suite ≠205 Miami Fl 33161-7486							
MIRMITE SSICI		*****	William For Select Floor			3. Date Incorporated or Qualified	3a. Da	3a. Date of Last Report		
							01/17/1995	04/0	9/1996	
2. Principal FI	ace of Business	2a.	Mailing Address				4, FEI Number			Applied For
21		26					65-0547464		1	Vot Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.						\$8.75	Additional
22		27					5. Certificate of Status Desired	Ll	Fee F	Required
City & State	1		City & State			·····	6. Election Campaign Financing		\$5.00	O May Be
23		28					Trust Fund Contribution			d to Fees
Zip			Zip Cou			,	8. This corporation has liability for	ntangible	lax under	s. 199.032,
24			29 30				Florida Statutes			
	9. Name and Address of Cur	rent Regis	tered Agent			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered A	gent	
KELL	LEY, CHRISTOPHER P				81	Name	•			
11098 BISCAYNE BLVD					82	Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
SUITE #205				ļ						
MIAS	AI FL 33161				83					
				1	84	City			85 Zir	o Code
					•		·	FL	63 24	, codo
11. Parsuant l	o the provisions of Sections 607.	0502 and 6	07.1608. Florida Stati	utes, the at	OVE	e-named co	orporation submits this statement for the p	urpose of	changing	its registered
office or n	egistered agent, or both, in the 5t a familiar with, and accept the pb	ate of Florid Digations of	da. Such change was L.Section 607.0505. F	s autnorized Florida Stat	a by utes	y ine corpor s.	orporation submits this statement for the partion's board of directors. I hereby accept	ot the appo	a inemanı	is registered
SIGNATURE	,									
SIGNATURE	big atur typed in proteined by gatered	agent and file	dappintable (NC)*E: Registered	Age	ent signature req	uired when reinstating)	DATE		
12.	OFFICERS	AND DIREC		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	
THLE	PSTD		☐ DELETE	1117	LE				Change	Addition
NAME	KELLEY, CHRISTOPHER P.			1.2 NA	ME					
STREET ADDRESS	11098 BISCAYNE BLVD #2	205		13 ST	REET	ADDRESS				
CHY-SI-ZP	MIAMI FL			1.4 Cf	ry-\$	ST-ZIP				
THE			DELETE	2.1 7)	Lŧ				Change	Addition
NAME				2 2 NA	Mé					
STREET ADDRESS				2.3 ST	REET	ADDRESS	•			
CITY ST ZIP				2. 4 C	TY - 9	ST-ZIP		.*		
THE			DELETE	3.1 Tr	(LE				☐ Change	Addition
NAMI				3 2 NA	ME					
STREET ADDRESS				3351	REET	ADDRESS				
C TY+ST+ZIP				3 4. C	TY-S	ST-ZIP				
THEF			☐ DELETE	4.1 Tr					Change	Addition
NAME				4, 2 N	AME					
STREET ADMINESS				4.3 ST	REET	ADDRESS				
CrTr - S1 - ZiP						ST - 21P				
THE			DELETE	5.1 TII			***************************************		Change	Addition
NAMÉ				5.2 NA					•	
5°REET ADDRESS						I ADDRESS				
1 :										
CITY+S1+ZiP TitleE			DELETE	6 1 TI		ST-ZIP			Change	Addition
1			E Detest						sum origings	
NAME				6 2 N/		r apportor				
STREET ADDRESS						ADDRESS				
(31Y-S1-ZP				64 C	IY-S	SY-ZIP				

SIGNATURE:

appears in Block 12 or Block 13 jt

STATURE AND TYPED OR PRINTED NAME OF MIGNING OFFICER OR DIRECTOR

President

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

Tan an officer of 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

2/17/44

(305) 893-6004

FILED

Feb 25 1997 8:00am

Secretary of State