

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000048236 (0)

1. Corporation Name

PAWLOWSKI, ROBERTS & COMPANY, P.A.



Principal Place of Business

501 E. KENNEDY BLVD.  
 SUITE 702  
 TAMPA FL 33602

Mailing Address

501 E. KENNEDY BLVD.  
 SUITE 702  
 TAMPA FL 33602

3. Date Incorporated or Qualified  
 06/20/1995

3a. Date of Last Report

2. Principal Place of Business

21 101 E. Kennedy Blvd

2a. Mailing Address

26 101 E. Kennedy Blvd.

4. FEI Number  
 59-3320547

Applied For  
 Not Applicable

22 Suite, Apt. #, etc.  
 2125

27 Suite, Apt. #, etc.  
 2125

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

23 Tampa FL

28 Tampa FL

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

24 Zip 33602 Country

29 Zip FL Country

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

9. Name and Address of Current Registered Agent

ROBERTS, RICHARD A  
 101 E. KENNEDY BLVD., #2125  
 TAMPA FL 33802

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

Signature of officer printed name of officer of agent of the corporation

Signature of Registered Agent printed name of agent of corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	RICHARD A. ROBERTS	
STREET ADDRESS	101 E. KENNEDY BLVD. #2125	
CITY - ST - ZIP	TAMPA, FL 33602	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 -04/18/96--01013--025  
 \*\*\*200.00

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 do hereby 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: *Richard A. Roberts* RICHARD A. ROBERTS 3-29-96 (813)225-1040  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E034 (12/95)