

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

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000027398 (2)

1. Corporation Name
GEORGE M. LUCAS, P.A.



Principal Place of Business 5600 SW 135TH AVENUE STE 212 MIAMI FL 33183	Mailing Address 5600 SW 135TH AVENUE STE 212 MIAMI FL 33183-5101
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2. Principal Place of Business 21 7875 BIRD ROAD Suite, Apt. #, etc. 22 228 City & State 23 MIAMI FL Zip Country 24 33155 25 U.S.A.	2a. Mailing Address 26 7875 BIRD ROAD Suite, Apt. #, etc. 27 228 City & State 28 MIAMI FL Zip Country 29 33155 30 U.S.A.	3. Date Incorporated or Qualified 03/28/1996	3a. Date of Last Report
		4. FEI Number 65-0728131	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent LUCAS, GEORGE M 5600 SW 135TH AVENUE STE 212 MIAMI FL 33183	10. Name and Address of New Registered Agent 81 Name LUCAS, GEORGE M 82 Street Address (P.O. Box Number is Not Acceptable) 7875 BIRD ROAD STE 228 83 84 City MIAMI FL 85 Zip Code 33155
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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: *George M Lucas* (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: **4/30/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE P ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME LUCAS, GEORGE M		1.2 NAME LUCAS, GEORGE M	
STREET ADDRESS 13020 SW 82ND TERRACE		1.3 STREET ADDRESS 13020 SW 82ND TERRACE	
CITY-ST-ZIP MIAMI FL 33183		1.4 CITY-ST-ZIP MIAMI FL 33183	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *George M Lucas* (Signature, typed or printed name of registered agent and title if applicable) DATE: **4/30/97** **305-264-2221**

CR2E034 (9/96)