

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

FILED

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 # P96000049179 (0)

1. Corporation Name
TROY G. AVERA, JR, P.A.



Principal Place of Business
9863 NORTHEAST SECOND AVENUE
SUITE C
MIAMI SHORES FL 33138

Mailing Address
9863 NORTHEAST SECOND AVENUE
SUITE C
MIAMI SHORES FL 33138-2721

3. Date Incorporated or Qualified: 06/06/1996
3a. Date of Last Report: N/A
4. FEI Number: 65-06 71548
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

21. 999 Brickell Ave
22. 555 Suite 555

26. 13506 NE 23 PLACE
27. North MIAMI FL

23. MIAMI FL
24. 33138
25. USA

28. North MIAMI FL
29. 33181
30. USA

9. Name and Address of Current Registered Agent
AVERA, TROY G JR
9863 NORTHEAST SECOND AVENUE
SUITE C
MIAMI SHORES FL 33138

10. Name and Address of New Registered Agent
81. Name: AVERA, TROY G. JR.
82. Street Address (P.O. Box Number is Not Acceptable): SUITE 555
83. 999 Brickell Ave
84. City: MIAMI FL
85. Zip Code: 33131

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox. Row 1: D, AVERA, TROY G JR, 9863 N.E. 2ND AVE., STE. C, MIAMI SHORES FL 33138.

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and checkboxes for Change/Addition. Row 1: Director, President, AVERA, TROY G. JR., 13506 NE 23 PL, N. MIAMI FL 33181.

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 as an attachment with an address.

SIGNATURE: _____ 2/1/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
805-358-6001
805-956-5584

CR2E034 (9/96)