

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

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Mar 25 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 # P96000099070 (0)

1. Corporation Name
ROBERT L. TANKEL, P.A.



Principal Place of Business
2030 MCCORMICK DRIVE - CLEARWATER FL 34619

Mailing Address
2030 MCCORMICK DRIVE CLEARWATER FL 34618-1041

3. Date Incorporated or Qualified: 12/05/1996
3a. Date of Last Report: N/A
4. FEI Number: 59-3418765
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

2. Principal Place of Business
21 1299 Main ST
22 Suite F
23 DUNEDIN FL
24 34698
25 Pinellas
26 SAME
27 SAME
28
29
30

9. Name and Address of Current Registered Agent
TANKEL, ROBERT L
2030 MCCORMICK DRIVE
CLEARWATER FL 34619

10. Name and Address of New Registered Agent
81 Name
82 Street Address/P.O. Box Number: 1299 MAIN STREET
83 SUITE F
84 City: DUNEDIN FL 85 Zip Code: 34698

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 607.0503, Florida Statutes.

SIGNATURE: Robert L Tankel 2/10/97
NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
D	TANKEL, ROBERT L	2030 MCCORMICK DRIVE	CLEARWATER FL 34619	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE	Change	Addition
1.1		1299 Main ST	Suite F		<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2						
1.3						
1.4						
2.1						
2.2						
2.3						
2.4						
3.1						
3.2						
3.3						
3.4						
4.1						
4.2						
4.3						
4.4						
5.1		600002124188			<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.2		-03/26/97--01002--012				
5.3		***165.00				
5.4						
6.1						
6.2						
6.3						
6.4						

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, unchanged, or on an attachment with address.

SIGNATURE: [Signature] 2/10/97 8137361901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone 0000000

CR2E034 (9/96)