


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

FILED

Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V06512 (0)
1. Corporation Name
BARRY APFELBAUM, P.A.

Principal Place of Business 3211 S. CONWAY RD. ORLANDO FL 32812 US	Mailing Address 3211 S. CONWAY RD. ORLANDO FL 32812 US
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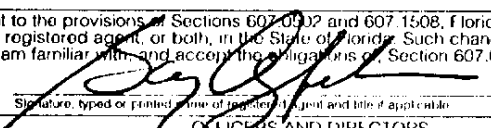


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1646 HILLCREST ST Suite, Apt. #, etc. 22 City & State 23 ORLANDO FL Zip Country 24 32803 25 US		2a. Mailing Address 26 1646 HILLCREST ST Suite, Apt. #, etc. 27 City & State 28 ORLANDO FL Zip Country 29 32803 30 US		3. Date Incorporated or Qualified 01/13/1992 4. FEI Number 59-3099058 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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9. Name and Address of Current Registered Agent APFEZBAUM, BARRY 3211 S. CONWAY RD. ORLANDO FL 32812		10. Name and Address of New Registered Agent 81 Name BARRY APFELBAUM 82 Street Address (P.O. Box Number is Not Acceptable) 1646 HILLCREST ST 83 84 City ORLANDO FL 85 Zip Code 32803	
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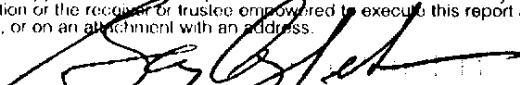
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE  DATE 4-3-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	APFELBAUM, BARRY	1.2 NAME	APFELBAUM, BARRY
STREET ADDRESS	3211 S. CONWAY RD.	1.3 STREET ADDRESS	1646 HILLCREST ST
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO FL 32803
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:



4-3-98 407-895-5334

CR2E034 (10/97)