

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
JENNIFER B. WATKINS  
Secretary  
Tallahassee, Florida 32399

APPROVED  
AND  
FILED

95 MAY 11 AM 9:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **476006**

(2)

PROJECT ADVISERS CORP.

7425 SW 42ND STREET  
MIAMI FL 33155

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MIAMI FL 33155

PLEASE PRINT IN THIS SPACE

2. Date of Incorporation (For Sole Proprietorship)		3a. Date of Last Report	
21. 05/09/1975		3b. 04/18/1994	
4. FIC Number 59-1699264		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status (Domestic) <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	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

ESTEVEZ, MICHEAL  
7425 SW 42ND ST  
MIAMI FL 33155

81. Name
82. Street Address (P.O. Box Number or Post Office)
83. City
84. State
85. Zip Code

FL

11. I, the undersigned, being a resident of this State, do hereby certify that the above named corporation, partnership or other entity is a corporation or partnership as defined in the Florida Statutes, and that the undersigned is the registered agent of said corporation or partnership as defined in the Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
NAME: PO ESTEVEZ, LINDA ADDRESS: 7425 SW 42ND STREET MIAMI FL ST	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ESTEVEZ, MICHEAL ADDRESS: 7425 SW 42ND STREET MIAMI FL EVP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: BARBELLA, MICHOLOS ADDRESS: 7425 SW 42ND STREET MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: PO MURPHY, LINDA F ADDRESS: 7425 SW 42 ST. MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ST ESTEVEZ, MICHAEL M ADDRESS: 7425 SW 42 ST. MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: EVP BARBELLA, NICHOLAS J ADDRESS: 7425 SW 42 ST. MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is a true and correct statement of the facts as stated in the 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 any provision or provision of the constitution or statutes of this State that requires the report as required by Chapter 602, Florida Statutes, and that my name appears on this report shall be deemed to be an acknowledgment of the truth of the information.

SIGNATURE: *Nicholas J. Barbella*  
NICHOLAS J. BARBELLA

5-3-95 305-266-8920