

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

FILED  
Apr 02 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 # 546854 (1)  
1. Corporation Name  
KENNETH M. BLOOM, P.A.

Principal Place of Business  
800 BRICKELL  
STE 1100  
MIAMI FL 33131  
US

Mailing Address  
800 BRICKELL AVE.  
SE 1100  
MIAMI FL 33131  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1401 BRICKELL Ave Suite, Apt. #, etc. 22 700 City & State 23 MIAMI FL Zip 24 33131		2a. Mailing Address 26 1401 BRICKELL Ave Suite, Apt. #, etc. 27 700 City & State 28 MIAMI FL Zip 29 33131		3. Date Incorporated or Qualified 09/01/1977	
25 Country US		30 Country US		4. FEI Number 59-1765244	
25 Country US		30 Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country US		30 Country US		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country US		30 Country US		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BLOOM, KENNETH M 800 BRICKELL AVE. SUITE 1100 MIAMI FL 33131		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1401 BRICKELL AVE # 700 83 84 City MIAMI FL 85 Zip Code 33131	
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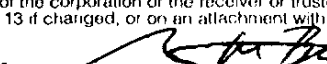
Address change only

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  Kenneth M. Bloom 3/29/98  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BLOOM, KENNETH M 800 BRICKELL AVE STE 1100 MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1401 BRICKELL AVE. # 700 MIAMI FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BLOOM, KENNETH M 800 BRICKELL AVE STE 1100 MIAMI FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1401 BRICKELL AVE. # 700 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Kenneth M. Bloom PRES. 3/29/98 (305)371-6800

CR2E034 (10/97)