

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

FILED
Feb 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 551977 (2)
1. Corporation Name
COOPER & WOLFE, P.A.



Principal Place of Business Mailing Address
44 W FLAGLER STREET 44 W FLAGLER STREET
SUITE 700, COURTHOUSE TOWER SUITE 700, COURTHOUSE TOWER
MIAMI FL 33130 MIAMI FL 33130

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 200 S. Biscayne Blvd.		26 200 S. Biscayne Blvd.		11/28/1977	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 3580		27 3580		59-1781952	
City & State		City & State		Applied For	
23 MIAMI, FL		28 MIAMI, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33131		29 33131		8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing Trust Fund Contribution	
25 USA		30 USA		5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
COOPER, MARC 44 W FLAGLER STREET SUITE 700, COURTHOUSE TOWER MIAMI FL 33130				Yes No	

10. Name and Address of New Registered Agent	
81 Name	COOPER, MARC
82 Street Address (P.O. Box Number is Not Acceptable)	200 S. Biscayne Blvd.
83 #	3580
84 City	MIAMI
85 Zip Code	FL 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 [Signature] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	
NAME	COOPER, MARC	1.2 NAME	
STREET ADDRESS	44 W FLAGLER STREET, #700	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33130	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	COOPER, MARC	2.2 NAME	
STREET ADDRESS	44 W FLAGLER STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	VDS	3.1 TITLE	
NAME	WOLFE, SHARON L	3.2 NAME	
STREET ADDRESS	44 W FLAGLER STREET, #700	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33130	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: [Signature] 2/16/98 305-371-1597

CR2E034 (10/97)