

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **594901** (1)

1. Corporation Name
1770 LAS OLAS CORPORATION



Principal Place of Business: **1915 NE 45 ST STE 105 FT LAUDERDALE FL 33304 US**
Mailing Address: **1915 NE 45 ST STE 105 FT LAUDERDALE FL 33304 US**

3. Date Incorporated or Qualified: **12/22/1978**
3a. Date of Last Report: **05/16/1995**
4. FEI Number: **59-1926777**
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 (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, City & State, and Zip/Country.

9. Name and Address of Current Registered Agent

**AMY CLEMENTS
1697 VELMA DE SOUTH
LARGO FL 34840**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST AMY CLEMENTS 1697 VELMA DR SOUTH LARGO FL 34840	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V GEORGE CLEMENTS 1697 VELMA DR. SOUTH FT. LAUDERDALE FL	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	D HARRIS, CAROL B. 1216 SEMINOLE DRIVE FT. LAUDERDALE FL	3. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP	PRESIDENT DIRECTOR J. ROGER HARRIS 1915 NE 45 ST #105 FT. LAUDERDALE FL 33308	4. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		7. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP		8. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		11. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP		12. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 change; or (in an attachment with an address

SIGNATURE: *J. Roger Harris* 4/19/96 954-771-1969
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day/Mo./Year

CR2E034 (12/95)