


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

FILED

May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 600117 (6)</b>			
1. Corporation Name <b>BROWN, DAVIDA, KHAN, RODRIGUEZ, RUIZ, WEINSTEIN, WHIRLEY-DIAZ &amp; DE MOYA, M.D.'S, P.A.</b>			
Principal Place of Business <b>2701 LEJEUNE ROAD SUITE #409 CORAL GABLES FL 33134</b>		Mailing Address <b>2701 LEJEUNE ROAD SUITE #409 CORAL GABLES FL 33134-5821</b>	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
25 Country		30 Country	
9. Name and Address of Current Registered Agent <b>BREIER, ROBERT G ESQ 1320 S. DIXIE HWY. #830 CORAL GABLES FL 33146</b>		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input type="checkbox"/> DELETE	
NAME	<b>BROWN, GEORGE E.</b>		
STREET ADDRESS	<b>2701 LEJEUNE ROAD</b>		
CITY-ST-ZIP	<b>CORAL GABLES FL</b>		
TITLE	DS	<input type="checkbox"/> DELETE	
NAME	<b>KHAN, MICHAEL</b>		
STREET ADDRESS	<b>2701 LEJEUNE ROAD</b>		
CITY-ST-ZIP	<b>CORAL GABLES FL</b>		
TITLE	VD	<input type="checkbox"/> DELETE	
NAME	<b>WEINSTEIN, BRUCE, M.D.</b>		
STREET ADDRESS	<b>2701 LEJEUNE ROAD</b>		
CITY-ST-ZIP	<b>CORAL GABLES FL</b>		
TITLE	VD	<input type="checkbox"/> DELETE	
NAME	<b>RUIZ, JORGE R</b>		
STREET ADDRESS	<b>2701 LEJEUNE ROAD</b>		
CITY-ST-ZIP	<b>CORAL GABLES FL</b>		
TITLE	VD	<input type="checkbox"/> DELETE	
NAME	<b>RODRIGUEZ, JOSE A</b>		
STREET ADDRESS	<b>2701 LEJEUNE ROAD</b>		
CITY-ST-ZIP	<b>CORAL GABLES FL</b>		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME	<b>WHIRLEY-DIAZ, JENNIFER</b>		
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME	<b>DE MOYA, JORGE</b>		
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME	<b>DAVIDA, JOSE G.</b>		
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	* See title changes in 12.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			
14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CP2E034 (9/96)

4/30/97

305-448-9018

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