FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 669587 (8)

1. Corporate Name
BRUCE M. STANO & COMPANY P.A.

Principal Place of Business
11910 N.W. 14TH STREET
PEMBROKE PINES FL 33026

Mailing Address
11910 N.W. 14TH STREET
PEMBROKE PINES FL 33026

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: 05/09/1980
3a. Date of Last Report: 05/12/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24 Country — 25 Zip — 29 Country — 30

4. FEI Number: 59-2018868 — Applied For / Not Applicable
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. The corporation net income for the preceding fiscal year was less than $ 100,000. Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
STANO, BRUCE M.
11910 N.W. 14TH ST.
PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City — FL — 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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 of Current or Proposed Registered Agent if the Corporation) (Signature of Registered Agent for Registered Corporation) Date

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	STANO, BRUCE M.
STREET ADDRESS	11910 N.W. 14TH ST.
CITY, ST, ZIP	PEMBROKE PINES FL
TITLE	VSD
NAME	STANO, MICHELE
STREET ADDRESS	11910 N.W. 14TH ST.
CITY, ST, ZIP	PEMBROKE PINES FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	[ ] Change [ ] Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
2. TITLE	[ ] Change [ ] Addition
2. NAME	
2. STREET ADDRESS	
2. CITY, ST, ZIP	
3. TITLE	[ ] Change [ ] Addition
3. NAME	
3. STREET ADDRESS	
3. CITY, ST, ZIP	
4. TITLE	[ ] Change [ ] Addition
4. NAME	
4. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	[ ] Change [ ] Addition
5. NAME	
5. STREET ADDRESS	
5. CITY, ST, ZIP	
6. TITLE	[ ] Change [ ] Addition
6. NAME	
6. STREET ADDRESS	
6. CITY, ST, ZIP	

14. I 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)(h), Florida Statutes. Further certify that the information contained in this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on attached amendment, or an attachment with an address.

SIGNATURE: BRUCE M. STANO - PRES 4-29-95 (305) 431-7883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000025 CP