

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

FILED
Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # 675992

(2)

1. Corporation Name
JOSEPH Z. FLEMING, P.A.



Principal Place of Business

Mailing Address

**25 S.E. SECOND AVE.
 620 INGRAHAM BLDG.
 MIAMI FL 33131
 US**

**516 25 SE SECOND AVE
 620 INGRAHAM BUILDING
 MIAMI FL 33131-1506**

2. Principal Name of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
Suite 516
 22 City & State

23 Zip Country

24 25

26 Suite, Apt. #, etc.
Suite 516
 27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
06/20/1980

3a. Date of Last Report
04/10/1996

4. FEI Number
59-2010469

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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLEMING, JOSEPH Z
 25 SE SECOND AVE SUITE 516, INGRAHAM BLD
 MIAMI FL 33131**

81 Name **Sue**
 82 Street Address (P.O. Box Number is Not Acceptable)
95 SE Second Ave Suite 516
 83
 84 City **Sue** **FL** 85 Zip Code **Sue**

11. Pursuant to the provisions of Sections 607.0509 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 is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the corporation under the provisions of Sections 607.0509 and 607.1508, Florida Statutes.

SIGNATURE **By Joseph Z Fleming PA** DATE **March 17 1997**

12. OFFICERS AND DIRECTORS

12.1 TITLE	PST	<input type="checkbox"/> DELETE
12.2 NAME	FLEMING, JOSEPH Z	
12.3 STREET ADDRESS	25 SE SECOND AVE, #620	516
12.4 CITY-ST-ZIP	MIAMI FL	
12.5 TITLE		<input type="checkbox"/> DELETE
12.6 NAME		
12.7 STREET ADDRESS		
12.8 CITY-ST-ZIP		
12.9 TITLE		<input type="checkbox"/> DELETE
12.10 NAME		
12.11 STREET ADDRESS		
12.12 CITY-ST-ZIP		
12.13 TITLE		<input type="checkbox"/> DELETE
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS	#516	
13.4 CITY-ST-ZIP		
13.5 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY-ST-ZIP		
13.9 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY-ST-ZIP		
13.13 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY-ST-ZIP		

14. I, the filer, 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 amendment with an address.

SIGNATURE: **By Joseph Z Fleming PA** DATE: **March 17 1997** **805-3730791**

CR2E034 (9/96)