


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

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F03686 (5) 1. Corporation Name ROMANIK AND LAVIN, P.A.			



Principal Place of Business 1001 HARRISON STREET HOLLYWOOD FL 33020	Mailing Address 1001 HARRISON STREET HOLLYWOOD FL 33020
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 10/29/1980	4. FEI Number 59-2036905 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent ROMANIK, DAVID S. 1001 HARRISON STREET HOLLYWOOD FL 33020				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			
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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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PO	NAME	ROMANIK, DAVID S.	1.1 TITLE		1.2 NAME	
STREET ADDRESS			1901 HARRISON ST.	1.3 STREET ADDRESS			
CITY-ST-ZIP			HOLLYWOOD FL	1.4 CITY-ST-ZIP			
TITLE	VS	NAME	LAVIN, ANDREW T.	2.1 TITLE		2.2 NAME	
STREET ADDRESS			1901 HARRISON STREET	2.3 STREET ADDRESS			
CITY-ST-ZIP			HOLLYWOOD FL	2.4 CITY-ST-ZIP			
TITLE	ST	NAME	LAVIN, ANDREW T.	3.1 TITLE		3.2 NAME	
STREET ADDRESS			1901 HARRISON ST.	3.3 STREET ADDRESS			
CITY-ST-ZIP			HOLLYWOOD FL	3.4 CITY-ST-ZIP			
TITLE		NAME		4.1 TITLE		4.2 NAME	
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		NAME		5.1 TITLE		5.2 NAME	
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		NAME		6.1 TITLE		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 *David S. Romanik* 4/29/98 954 921 4657

CR2E034 (10/97)