


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

<b>CORPORATION ANNUAL REPORT 1995</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	<b>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</b>  <b>95 APR -4 PM 11:26</b>	
<b>DOCUMENT # F06721 (7)</b> <small>1. Corporation Name</small> <b>TWOROGER AND ASSOCIATES, P.A.</b>				
<small>Principal Place of Business</small> <b>100 CROSSROADS BUILDING 2651 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33306</b>		<small>Mailing Address</small> <b>100 CROSSROADS BUILDING 2651 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33306</b>		
<small>DO NOT WRITE IN THIS SPACE.</small>				
<small>2. Principal Place of Business</small> <b>21</b>		<small>3a. Date of Last Report</small> <b>04/29/1994</b>		
<small>2a. Mailing Address</small> <b>26</b>		<small>3. Date Incorporated or Qualified</small> <b>11/24/1980</b>		
<small>Suite, Apt. #, etc.</small> <b>22</b>		<small>4. FEI Number</small> <b>59-2065504</b>		
<small>City &amp; State</small> <b>23</b>		<small>5. Certificate of Status Desired</small> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
<small>Zip</small> <b>24</b> <small>Country</small> <b>25</b>		<small>6. Election Campaign Financing Trust Fund Contribution</small> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<small>29</small> <small>30</small>		<small>8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes</small> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>9. Name and Address of Current Registered Agent</b>  <b>TWOROGER, KENNETH F. 2651 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33306</b>		<b>10. Name and Address of New Registered Agent</b>  <b>81 Name</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83</b> <b>84 City</b> <b>FL</b> <b>85 Zip Code</b>		
<small>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.</small>  <small>SIGNATURE</small> <i>[Signature]</i> <small>DATE</small> <b>3/28/95</b> <small>NOTE: Registered Agent signature required when reappointing.</small>				
<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>		
<small>TITLE</small> <b>PD</b>	<small>NAME</small> <b>TWOROGER, KENNETH F.</b>	<small>1.1 TITLE</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small> <b>2651 NO. FEDERAL HWY</b>	<small>CITY - ST - ZIP</small> <b>FT. LAUDERDALE FL</b>	<small>1.2 NAME</small>		
<small>TITLE</small>		<small>1.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>1.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small>		<small>2.1 TITLE</small>		
<small>CITY - ST - ZIP</small>		<small>2.2 NAME</small>		
<small>TITLE</small>		<small>2.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>2.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small>		<small>3.1 TITLE</small>		
<small>CITY - ST - ZIP</small>		<small>3.2 NAME</small>		
<small>TITLE</small>		<small>3.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>3.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small>		<small>4.1 TITLE</small>		
<small>CITY - ST - ZIP</small>		<small>4.2 NAME</small>		
<small>TITLE</small>		<small>4.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>4.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small>		<small>5.1 TITLE</small>		
<small>CITY - ST - ZIP</small>		<small>5.2 NAME</small>		
<small>TITLE</small>		<small>5.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>5.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>STREET ADDRESS</small>		<small>6.1 TITLE</small>		
<small>CITY - ST - ZIP</small>		<small>6.2 NAME</small>		
<small>TITLE</small>		<small>6.3 STREET ADDRESS</small>		
<small>NAME</small>		<small>6.4 CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<small>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 110.07(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 changed, or on an attachment with an address.</small>				
<b>SIGNATURE:</b> <i>[Signature]</i> <b>KENNETH F. TWOROGER</b>		<b>3/28/95</b> <b>305/565-8990</b> <b>MARCH 28, 1995</b>		