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CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 10 AM 8:50

DOCUMENT # **G28943** **(0)**

1. Corporation Name

ANDREW L. SIEGEL, P.A.

Principal Place of Business

% ANDREW L SIEGEL
300 NW 82ND AVE., SUITE 412
PLANTATION FL 33324

Mailing Address

% ANDREW L SIEGEL
300 NW 82ND AVE., SUITE 412
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/12/1983**

3a. Date of Last Report: **01/21/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **59-2293607** 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 § 199.032, Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SIEGEL, ANDREW L.
300 NW 82ND AVE., SUITE 412
PLANTATION FL 33324

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

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	DPS	1. TITLE	[ ] Change [ ] Addition
NAME	SIEGEL, ANDREW L	1. NAME	
STREET ADDRESS	524 N.E. 13TH AVENUE	1. STREET ADDRESS	
CITY ST ZIP	FT. LAUDERDALE FL	1. CITY ST ZIP	
TITLE	T	2. TITLE	[ ] Change [ ] Addition
NAME	SIEGEL, ANDREW L	2. NAME	
STREET ADDRESS	524 N.E. 13TH AVENUE	2. STREET ADDRESS	
CITY ST ZIP	FT. LAUDERDALE FL	2. CITY ST ZIP	
TITLE		3. TITLE	[ ] Change [ ] Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY ST ZIP		3. CITY ST ZIP	
TITLE		4. TITLE	[ ] Change [ ] Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY ST ZIP		4. CITY ST ZIP	
TITLE		5. TITLE	[ ] Change [ ] Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY ST ZIP		5. CITY ST ZIP	
TITLE		6. TITLE	[ ] Change [ ] Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY ST ZIP		6. CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is validly furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further, I certify that the information indicated on this annual report or supplemental annual report is true and is made 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 hereof or on an attachment with an address.

SIGNATURE: [signature] 1/12/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

0232704 CP