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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # G77093

(4)

ALAN A. JAFFE, PHD. & ASSOCIATES, INC.

FILED May 01 1997 8:00am Secretary of State



HON BOYAL PA	of Business		Mailing Address									
8190 ROYAL PALM BLVD STE 204 CORAL SPRINGS FL 33065			8180 ROYAL PALM BLVD STE 204 CORAL SPRINGS FL 33085-5738									
							3. Date Incorporated or Qualified 01/03/1984 3a. Date of Last Report 03/21/1996					ort
·1	ace of Business	2	a. Mailing Address				FEI Number				Applie	d For
Suite, Apt. #, etc		26	26 Suite, Apt. #, etc.				59-2359734			Not Applicab		
		27				5.	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
City & State	,	28	City & State			6.	Election Campai Trust Fund Cont				00 Ma ed to F	
Zip	Country 25	29	Zip	Coun	lry		This corporation Florida Statutes			tax unde	ers. 19	9.032,
	g. Name and Address					10.	Name and Add	ress of New R	legistered .	Agent		
JAFF	E, ALAN A., PH.D.			1	1 Name)						
11215 N.W. 5TH STREET CORAL SPRINGS FL 33071				ļ	32 Stree	t Address (P	ddress (P.O. Box Number is Not Acceptable)					
CON	AL OFNINGO FL 650/ I			ļī.	13		·	 				
				ļ	4 City				FI	85 2	ip Cod	ie
1. Pursuant to office or re	o the provisions of Section egistered agent, or both, in infamiliar with, and accept	s 607,0502 and	607.1508, Florida Sta	tutes, the ab	ove-name	d corporation	n submits this sta	tement for the	purpose of	changin ointment	g its re	gister
		i the State of Fig	orida. Such change wa	as authorized	by the co	rporation's b	oard of directors	. I HEIDOY BIGU				
agent. Far	m familiar with, and accept	the obligations	orida. Such change wa ol, Section 607.0505.	as authorized Florida Statu	by the co tes.	rporation's b	poard of directors	. Thereby acc	-6.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0			
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SIGNATURE 2.	Sugrature Typed or product name of OFFI	registerud agent and i	nitle é applicable (l ECTORS	NOTE: Registered	Agent signati E	re required when	reinstating)		DATE	DIRECT	ORS II	N 12
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am an efficer 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 13 if changed, or on an attachment with an address.

SIGNATURE: