

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

pg. 1052

PROFIT CORPORATION ANNUAL REPORT 96-1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morfitt Secretary of State DIVISION OF CORPORATIONS
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FILED

97 APR 28 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 679567 1. Corporation Name Sam Elias, P.A.

Principal Place of Business 3950 N. 37th Ave Hollywood, FL 33021	Mailing Address
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 12/30/83	3a. Date of Last Report 1996
4. FEI Number 59-2363895	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
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent Sam Elias, P.A. 3950 N. 37th Ave Hollywood, FL 33021

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 FL 86 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 reappointing) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	President
STREET ADDRESS	Samuel Elias
CITY-ST-ZIP	3950 N. 37th Ave Hollywood, FL 33021
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	900002167209--3
1.4 CITY-ST-ZIP	-05/06/97--01048--012 ****365.00 ****365.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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: X Samuel Elias April 10, 1997 President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

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PURITZ AND WEINTRAUB, LLP

Certified Public Accountants

1244 N. University Drive
Plantation, Florida 33322
Telephone (954) 370-2727
Fax (954) 370-2778

Eduardo S. Gonzalez C.P.A.
Lauren S. Puritz C.P.A.
Anthony Robledo C.P.A.
Raul M. Saenz C.P.A.
Robert J. Sax C.P.A.
Shabbir H. Songerwala C.P.A.
Cira H. Villazon C.P.A.
Tracy D. Weintraub C.P.A.

Miami Office:
8180 N.W. 36th Street
Suite 100
Miami, Florida 33166
Telephone (305) 592-1411
Fax (305) 592-9899

April 24, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Sam Elias, P.A.
EIN: 59-2363895
Ref. #: G79567

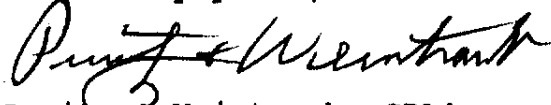
Dear Sir/Madam,

The above referenced taxpayer has asked us to respond to your letter dated April 17, 1997. Please be advised that the taxpayer moved during the year ended December 31, 1996 and did not receive a Florida Annual Report to file with your office. The corporation has filed all prior year documents in a timely fashion.

Lesley Sellers, a telephone representative of your office, advised us that due to the circumstances mentioned above, the taxpayer would only need to resubmit the original 1997 document along with a check for \$365.00 (\$200 for 1996 and \$165 for 1997) and the corporation would be reinstated.

Attached please find a check for \$365.00 along with the original 1997 Florida Annual Report. Please reinstate the corporation. If you have any questions or need additional information, do not hesitate to contact our office.

Very truly yours,



Puritz & Weintraub, CPA's

enclosures
cc: Sam Elias