

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

FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H18034** (9)  
1. Corporation Name  
**JAFFE DESIGN ASSOCIATES, INC.**

Principal Place of Business <b>% ALAN R. BURTON. ESO. 1001 N.W. 62ND ST. FT. LAUDERDALE FL 33309</b>	Mailing Address <b>% ALAN R. BURTON. ESO. 1001 N.W. 62ND ST. FT. LAUDERDALE FL 33309</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>7522 WILES ROAD</b> Suite Apt. #, etc. 22 <b>101</b> City & State 23 <b>CORAL SPRINGS, FL</b> Zip 24 <b>33067</b>		2a. Mailing Address 26 <b>7522 WILES RD</b> Suite Apt. #, etc. 27 <b>101</b> City & State 28 <b>CORAL SPRINGS, FL</b> Zip 29 <b>33067</b>		3. Date Incorporated or Qualified <b>08/23/1984</b>	
25 <b>U.S.A.</b>		30 <b>U.S.A.</b>		4. FEI Number <b>59-2442652</b>	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BURTON, ALAN  
2101 W.COMMERCIAL BLVD.,#5400  
SUITE 201  
FT.LAUDERDALE FL 33009**

10. Name and Address of New Registered Agent

81 Name	<b>BURTON, ALAN</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>7522 WILES ROAD</b>
83	<b>SUITE 101</b>
84 City	<b>CORAL SPRINGS, FL</b>
85 Zip Code	<b>33067</b>

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	<b>PVT</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NASSAU, MARLA JAFFE</b>	1.2 NAME	
STREET ADDRESS	<b>4822 NW 99 LANE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CORAL SPRINGS FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>S</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JAFFE, MRS. MORTON</b>	2.2 NAME	
STREET ADDRESS	<b>1400 ST. CHARLES PL #217</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		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:

*Marla Jaffe* **Pres** 4/1/98 954-346-8558

CR2E034 (10/97)