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Feb 11 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J19215 (9)  
1. Corporation Name  
ARMANDO OLIVEROS, JR., P.A.



Principal Place of Business: 6361 SUNSET DR, 2307 DOUGLAS RD. #200, MIAMI FL 33143, US  
Mailing Address: 6361 SUNSET DR, 2307 DOUGLAS RD. #200, MIAMI FL 33143-4842, US

3. Date Incorporated or Qualified: 06/12/1986  
3a. Date of Last Report: 02/26/1996

2. Principal Place of Business: 21 6361 SUNSET DR  
22 Suite, Apt. #, etc.  
23 City & State: MIAMI FL  
24 Zip: 33143  
25 Country: USA  
2a. Mailing Address: 26 SAME  
27 Suite, Apt. #, etc.  
28 City & State  
29 Zip  
30 Country

4. FEI Number: 59-2688892  
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 s. 199.032, Florida Statutes: Yes (checked) No

9. Name and Address of Current Registered Agent: OLIVEROS, ARMANDO, JR., 2307 DOUGLAS RD #301, 2307 DOUGLAS RD., #200, MIAMI FL 33145

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: FL

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

Table with 12 rows for Officers and Directors. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with a 'DELETE' checkbox.

Table with 13 rows for Additions/Changes to Officers and Directors in 12. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with 'Change' and 'Addition' checkboxes.

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: [Signature] e/4/97 669 0060  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)