FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

AND FILED

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

95 MAY -1 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J32954 (6)

1. Corporate Name

ELLIOT S. SHAW, P.A.

Principal Address

1601 FORUM PLACE
STE 1212
W PALM BCH. FL 33401
US

Mailing Address

1601 FORUM PLACE
STE 1212
WEST PALM BEACH FL 33401
US

SPACE BELOW FOR OFFICE USE ONLY

3. Date Incorporated or Qualified: 09/05/1986

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

4. FEI Number: 59-2762697 — Applied For / Not Applicable

Suite, Apt. # — 22: Suite #403

Suite, Apt. # — 27: Suite #403

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City, State — 23

City, State — 28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip — 24 — County — 25 — Zip — 29 — County — 30

8. This corporation has filed its income tax return under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SHAW, ELLIOT S.
1601 FORUM PLACE
STE 1212
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 Suite #403

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

TITLE	DP
NAME	SHAW, ELLIOT S.
STREET ADDRESS	1601 FORUM PLACE, STE. ~~1212~~ 403
CITY, ST, ZIP	WEST PALM BEACH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☑ Change ☐ Addition

STREET ADDRESS: Suite #403

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information contained in the annual report or supplemental annual report is true and correct and that the signature shall have the same legal effect and force as if made under oath that I am an officer or director of the corporation, that no revoke or limited amendment to revoke the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or is attached with an address.

SIGNATURE: Elliot S. Shaw, 4/28/95 407-687-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0242696 CP