

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

**APPROVED  
AND  
FILED**

95 APR 17 PM 12:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **J55188** (3)

1. Corporation Name  
**WILLIAM D. MATTHEWMAN, P.A.**

Principal Place of Business <b>% WILLIAM D. MATTHEWMAN 9130 S DABELAND BLVD STE 1129 MIAMI FL 33158-4812</b>	Mailing Address <b>% WILLIAM D. MATTHEWMAN 9130 S DABELAND BLVD STE 1129 MIAMI FL 33158-4812</b>
---	---

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>01/27/1987</b>	3a. Date of Last Report <b>02/03/1994</b>
4. FEI Number <b>59-2816609</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 <b>1481 N.W. North River Drive</b>	2a. Mailing Address 25 <b>1481 N.W. North River Drive</b>
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 <b>MIAMI FLA.</b>	City & State 28 <b>MIAMI FLA.</b>
Zip 24 <b>33125</b>	Country 25 <b>USA</b>
Zip 29 <b>33125</b>	Country 30 <b>USA</b>

9. Name and Address of Current Registered Agent  
**MATTHEWMAN, WILLIAM D.  
9130 S DABELAND BLVD STE 1129  
MIAMI 33158**

10. Name and Address of New Registered Agent

81 Name <b>Same</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>1481 N.W. NORTH RIVER DRIVE</b>
83
84 City <b>MIAMI</b>
85 State <b>FL</b>
86 Zip Code <b>33125</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 William D. Mathewman DATE April 5, 1995

12. OFFICERS AND DIRECTORS

TITLE <b>D</b>	NAME <b>MATTHEWMAN, WILLIAM D.</b>
STREET ADDRESS <b>9130 S DABELAND BLVD 1129</b>	
CITY - ST - ZIP <b>MIAMI FL</b>	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	NAME
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>1481 N.W. NORTH RIVER DRIVE</b>
1.4 CITY - ST - ZIP	<b>MIAMI FLA. 33125</b>
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: William D. Mathewman DATE: April 5, 1995 (305) 325-0707