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FILED
Apr 24 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 # J94877 (4)

1. Corporation Name

DANIELS, KASHTAN & FORNARIS, P.A.

Principal Place of Business

% RICHARD G. DANIELS
TWO ALHAMBRA PLAZA SUITE 810
CORAL GABLES FL 33134

Mailing Address

% RICHARD G. DANIELS
TWO ALHAMBRA PLAZA SUITE 810
CORAL GABLES FL 33134-5202



3. Date Incorporated or Qualified
09/28/1987

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0010573

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 ☐ No

2. Principal Place of Business

21 241 Sevilla Ave

Suite, Apt. #, etc.

22 P.H.2

City & State

23 Coral Gables

Zip

24 33134

Country

25 Florida

2a. Mailing Address

26 241 Sevilla Ave

Suite, Apt. #, etc.

27 P.H.2

City & State

28 Coral Gables

Zip

29 33134

Country

30 Florida

9. Name and Address of Current Registered Agent

DANIELS, RICHARD G.
2 ALHAMBRA PLAZA - 241 Sevilla Ave
SUITE 810 P.H.2
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME DANIELS, RICHARD G.
STREET ADDRESS 2 ALHAMBRA PLAZA #810 241 Sevilla Ave
CITY-ST-ZIP CORAL GABLES FL P.H.2

TITLE VP
NAME KASHTAN, MICHAEL F.
STREET ADDRESS 2 ALHAMBRA PLAZA #810 241 Sevilla Ave
CITY-ST-ZIP CORAL GABLES FL P.H.2

TITLE ST
NAME FORNARIS, MARTHA D.
STREET ADDRESS 2 ALHAMBRA PLAZA #810 241 Sevilla Ave
CITY-ST-ZIP CORAL GABLES FL P.H.2

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

[Signature]

4/18/97 (305) 448-7988

CR2E034 (9/96)