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CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 8:25

DOCUMENT # **K68562** **(3)**

1. Corporation Name

RICHARD H. CRITCHLOW, P.A.

Principal Place of Business	Mailing Address
C/O RICHARD H. CRITCHLOW 201 S BISCAYNE BLVD 11TH FL MIAMI FL 33131	C/O RICHARD H. CRITCHLOW 201 S BISCAYNE BLVD 11TH FL MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/27/1989**
3a. Date of Last Report: **10/28/1994**

2. Principal Place of Business (21) / Street, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Street, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

4. FEI Number: **59-2376487** — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — **$8.75** Additional Fee Required

6. Election Campaign Treasurer and Final Fund Contributor(s) [ ] — **$5.00** May Be Added to Fees

8. Did corporation have liability for chapter taxes under F.S. 220.03(4), Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

CRITCHLOW, RICHARD H.
201 S BISCAYNE BLVD, 11TH FL
MIAMI FL 33131

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City **FL** 05 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1908, 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(S)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CRITCHLOW, RICHARD H.
STREET ADDRESS	201 S BISCAYNE BLV 11TH FL
CITY ST ZIP	MIAMI FL

13. ADDITIONS, CHANGES OR DELETIONS

1 TITLE [ ] Change [ ] Addition
1 NAME
1 STREET ADDRESS
1 CITY ST ZIP

2 TITLE [ ] Change [ ] Addition
2 NAME
2 STREET ADDRESS
2 CITY ST ZIP

3 TITLE [ ] Change [ ] Addition
3 NAME
3 STREET ADDRESS
3 CITY ST ZIP

4 TITLE [ ] Change [ ] Addition
4 NAME
4 STREET ADDRESS
4 CITY ST ZIP

5 TITLE [ ] Change [ ] Addition
5 NAME
5 STREET ADDRESS
5 CITY ST ZIP

6 TITLE [ ] Change [ ] Addition
6 NAME
6 STREET ADDRESS
6 CITY ST ZIP

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and accurately for the purpose stated in Sec. 607.0122, Florida Statutes. I further certify that the information indicated on this 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, added or deleted.

SIGNATURE: Richard H. Critchlow **1/11/95** (305) 373-1000

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

0120720 CP