

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 27 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 # L50474 (0)

1. Corporation Name  
PEISNER RUGGIERO & MARTINEZ, P.A.

Principal Place of Business

1640 LEE RD  
WINTER PARK FL 32789-9208

Mailing Address

1640 LEE RD  
WINTER PARK FL 32789-2208



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/12/1990		3a. Date of Last Report 04/18/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2989285		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

PEISNER, ERIC, S  
1640 LEE RD  
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

8a. Name	
8b. Street Address (P.O. Box Number is Not Acceptable)	
City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at- torney-in-fact, officer or registered agent, or both, in the State of Florida. Such change was authorized 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<del>VP</del> VP T D <input type="checkbox"/> DELETE	11 TITLE	VP T D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEISNER, ERIC	12 NAME	
STREET ADDRESS	1640 LEE RD	13 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	14 CITY-ST-ZIP	
TITLE	<del>VP</del> P D <input type="checkbox"/> DELETE	21 TITLE	P D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUGGIERO, ALFRED J.	22 NAME	
STREET ADDRESS	1640 LEE RD	23 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	24 CITY-ST-ZIP	
TITLE	<del>VP</del> S D <input type="checkbox"/> DELETE	31 TITLE	S D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	H. LOUIS MARTINEZ	32 NAME	H LOUIS MARTINEZ
STREET ADDRESS	1640 Lee Rd	33 STREET ADDRESS	1640 Lee Rd
CITY-ST-ZIP	Winter Park FL 32789	34 CITY-ST-ZIP	Winter Park FL 32789
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	100002127421 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	-03/28/97--01103--000003
STREET ADDRESS		53 STREET ADDRESS	***165.00
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)