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94 JUL 26 PM 12:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT <b>1994</b>	 FLORIDA DEPARTMENT OF STATE JAN 20TH Secretary of State DIVISION OF CORPORATIONS
1. Corporation Name: <b>PATRICIA A. MONTALBANO, P.A.</b>	DOCUMENT # <b>L65519 (5)</b>

Mailing Address: <b>1301 S. OCEAN DRIVE FT. LAUDERDALE FL 33316</b>	Principal Place of Business: <b>1301 S. OCEAN DRIVE FT. LAUDERDALE FL 33316</b>
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If above addresses are incorrect in any way, use through to correct information and enter correction in 21-24.		3. Date Incorporated or Qualified <b>04/13/1990</b>	3a. Date of Last Report <b>10/15/1993</b>
2. Mailing Address: 21. <b>1301 S. OCEAN DRIVE</b> Suite, Apt. #, etc. 22. <b>FT. LAUDERDALE, FL</b> City & State 23. <b>33314</b> Zip 24. <b>USA</b> Country	2b. Principal Place of Business: 26. <b>3921 S.W. 47th Avenue</b> Suite, Apt. #, etc. 27. <b>FT. LAUDERDALE, FL</b> City & State 28. <b>Suite 1009</b> Zip 29. <b>33314</b> Country 30. <b>USA</b>	4. FEI Number <b>65-0204122</b>	Applied For Not Applicable
		5. Certificate of Status (Searched) <b>\$8.75 Additional Fee Required</b>	6. Election (Searched) Financing Trust Fund Contributions <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
		7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	8. This corporation has liability for intangible tax under S. 193(3)(c), Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>MONTALBANO, PATRICIA A. 1301 S. OCEAN DRIVE FT LAUDERDALE FL 33316</b>	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code <b>FL</b>
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11. Pursuant to the provisions of Sections 607 (5)(b) and 607 (5)(b) or Sections 617 (5)(b) and 617 (5)(b) 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 (5)(b) or 617 (5)(b) Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS SINCE:	
11 TITLE	P/D	11 TITLE	
12 NAME	MONTALBANO, PATRICIA	12 NAME	
13 STREET ADDRESS	1301 S. OCEAN DRIVE	13 STREET ADDRESS	
14 CITY ST. ZIP	FT. LAUDERDALE FL	14 CITY ST. ZIP	
21 TITLE		21 TITLE	
22 NAME		22 NAME	
23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY ST. ZIP		24 CITY ST. ZIP	
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY ST. ZIP		34 CITY ST. ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY ST. ZIP		44 CITY ST. ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY ST. ZIP		54 CITY ST. ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST. ZIP		64 CITY ST. ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished by the corporation, from any liability of non-compliance with law (see 119.0) that this information is filed on this annual report or supplemental annual report that I have fulfilled all obligations concerning unclaimed property imposed by Chapter 607 or Chapter 617 of the Florida Statutes, and that my name appears on Block 1, or Block 1A, of the corporation's triplicate annual report.

SIGNATURE: *Patricia A Montalbano* Patricia Montalbano 7/21/94 321-1999  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER DIRECTOR