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

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

STREET ADDRESS

SIGNATURE: V

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M16529

(3)

RONALD FELDMAN, D.C., P.A.

Mailing Address Principal Place of Business 8291 PINE ISLAND ROAD TAMARAC FL 33321 8291 PINE ISLAND ROAD TAMARAC FL 33321-1541 3a. Date of Last Report 3. Date Incorporated or Qualified 06/10/1985 05/01/1996 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For 65-0089877 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Bo 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 25 Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FELDMAN, RONALD 8291 PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33321 83 11. Pursuant to the provisions of Sections 607.0502 and 607.0503. 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 little if applicable (NOTE: Registored Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)DELETE Change TITLE 1.1 TITLE FELDMAN, RONALD 1.2 NAME NAME 8742 N.W. 50TH DRIVE 2696 EDGENATER CT. STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL** FT. LAUDERDAILE, FL 33332-3401 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CHTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change \_\_\_ Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIF CITY-ST-ZIP DELETE Change Addition TITLE 51 THILE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 \$TREE1 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 eath; that I am an officer or director of the corporation or the report is true and execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 19 or Block 19

4/29/97 X954 7226637

Change

Addition

FILED

May 12 1997 8:00am

Secretary of State