


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

FILED

Mar 31 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # M38047</b> 1. Corporation Name: <u>Bruffen Ewans &amp; Associates, Inc.</u>			
2. Principal Place of Business: <u>4646 N.W. 8th Way</u> <u>Oakland Park FL 33309</u>		3a. Date of Last Report: <u>2196</u>	
21. Principal Place of Business: <u>4646 N.W. 8th Way</u> Suite, Apt. #, etc.:		26. Mailing Address: <u>4646 N.W. 8th Way</u> Suite, Apt. #, etc.:	
22. City, State: <u>Oakland Park FL</u>		27. City, State: <u>Oakland Park FL</u>	
23. Zip: <u>33309</u> Country: <u>Broward</u>		28. Zip: <u>33309</u> Country: <u>Broward</u>	
24. Zip: <u>33309</u> Country: <u>Broward</u>		29. Zip: <u>33309</u> Country: <u>Broward</u>	
9. Name and Address of Current Registered Agent: <u>Jay C. Evans</u> <u>13951 S.W. 51st Manor</u> <u>St. Landersdale FL 33332</u>		10. Name and Address of New Registered Agent: 81. Name: 82. Street Address (P.O. Box Number is Not Acceptable): 83. 84. City: <u>FL</u> 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: <u>Jay C. Evans</u>		DATE: <u>3-11-97</u>	
12. OFFICERS AND DIRECTORS			
TITLE: <u>P/T</u> <input type="checkbox"/> DELETE NAME: <u>H. J. Bruffen II</u> STREET ADDRESS: <u>4646 N.W. 8th Way</u> CITY-STATE-ZIP: <u>Oakland Park FL 33309</u>			
TITLE: <u>V.P. / S</u> <input type="checkbox"/> DELETE NAME: <u>Jay C. Evans</u> STREET ADDRESS: <u>13951 S.W. 51st Manor</u> CITY-STATE-ZIP: <u>St. Landersdale FL 33332</u>			
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-STATE-ZIP:			
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TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-STATE-ZIP:			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME: 1.3 STREET ADDRESS: 1.4 CITY-STATE-ZIP:			
2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME: 2.3 STREET ADDRESS: 2.4 CITY-STATE-ZIP:			
3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-STATE-ZIP:			
4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-STATE-ZIP:			
5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-STATE-ZIP:			
6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-STATE-ZIP:			
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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 contained 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; 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, changed, or on an attachment with an address.			
SIGNATURE: <u>[Signature]</u>		DATE: <u>3-11-97</u> (954) 493-9933	

CR2E034 (9/96)