

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

FILED
May 15 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # M82881 (7)
1. Corporation Name
ROBERT V. FITZSIMMONS, P.A.

Principal Place of Business
2665 S. BAYSHORE DRIVE
SUITE 201
MIAMI FL 33133

Mailing Address
2665 S. BAYSHORE DRIVE
SUITE 201
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

| | | | | | |
|---|------------------------|--|------------------------|--|-------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 05/20/1988 | |
| 21 2512 Abaco Avenue | 22 Suite, Apt. #, etc. | 26 Same | 27 Suite, Apt. #, etc. | 4. FEI Number 65-0055958 | Applied For Not Applicable |
| 23 Miami FL | 24 33133 | 25 USA | 28 | 29 | 30 |
| 5. Certificate of Status Desired <input type="checkbox"/> | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 7. Additional Fee Required \$8.75 | | 9. May Be Added to Fees \$5.00 | | | |

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|---|--|---|--|
| 9. Name and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| FITZSIMMONS, ROBERT V. 2665 S. BAYSHORE DRIVE SUITE 201 MIAMI FL 33133 | | 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2950 S.W. 27th Avenue 83 84 City Miami FL 85 Zip Code 33133 | |

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  DATE 4/28/98

| | | | |
|--|--|--|-------------------|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD FITZSIMMONS, ROBERT V. 2665 S. BAYSHORE DRIVE MIAMI FL 33133 | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | 2512 Abaco Avenue |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | |

14. I 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:  DATE 4/28/98 305-460-6547

CR2E034 (10/97)