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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

M95163

(5)

REBECCA J. COVEY PROFESSIONAL ASSOCIATION

HEBEOO	A 0. 004E1 1 1101 E001014				
Principal Place of Business		Mailing Address		(120/00/11 (10 12/01 doub) 11912 annea	fibt Sibit Briffer Anfler Arfter Biffer samer
500 NE 4TH ST STE 100 FT. LAUDERDALE FL 33301		500 NE 4TH ST STE 100 FT. LAUDERDALE FL 33301			
				3. Date Incorporated or Qualified 08/22/1988	3a. Date of Last Report 02/22/1995
2. Principal Piace	e of Business 8 S.E. First Av	2a. Mailing Address	Green A 10	4. FEI Number 65-0075448	Applied For Not Applicable
址 】るけ Suite, Apt. # _c	8 Dig. TRSI FIV	(26) 1318 SE Suite, Apt. #, etc.	TIEST TOE,		_ \$8.75 Additional
2	ote.	27		Certificate of Status Desired	Fee Required
Git & State H. Landordal Fl		City & State	dodale	6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
3331	6 [25]		30] USA	Florida Statutes Yes 10. Name and Address of New R	
	9. Name and Address of Current	Registered Agent	81 Name	TU. Name and Address of Non-I	oğisteren Hğorii
COVEY D	REBECCA J.		82 Street Add	ress (P.O. Box Number is Not Acceptab	ale)
	TH ST STE 100		1318 S.E. HRST AVE.		
	ERDALE FL 33301		83		
			84 City	1 . 1 . 0 . 0 .	85 Zip Code
		1 007 1500 Fly do Ctot too	the above period serve	ration submits this statement for the pu	roose of changing its registered offi
or registered	d agent, or both, in the State of Horid	ia. Such change was a uthorized	by the corporation's box	ard of directors. I hereby accept the app	ointment as registered agent. I am
familiar wilet	and accept the obligations of Section	on 607.0505, Florida Statutes.			1-31-96
SIGNATURE : SI	ly naural typical or printed name of registrated agreets	and the if applicable NOTE:	Registered Agent signature requir		DATE
2.	OFFICERS AND	,	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12 Change (1) Addition
lilf	DPS	DELETE	1. 1 Tille		Citalige D Addition
AVI:	COVEY, REBECCA J.		1.2 NAME 1.3 STREET ADDRESS	1318 SE FIRST	Aspaul
TREE LADDRESS	500 NE 4TH ST STE 100 FT. LAUDERDALE FL		14 CiTY-ST-ZIP	FORT LULICONNO	le F1 33316
11.4 - \$1 - ZiP H. F	T . LAUDENDALE I L	DELETE	2 1 TITLE	1001 4	☐ Change ☐ Addition
AM:	COVEY, REBECCA J.		2 2 NAME	and at them A	۸۸
STREET ADDRESS	500 NE 4TH ST STE 100		2 3 STREET ADDRESS	1318 SE first A	
11 St 7-P	FT. LAUDERDALE FL		2.4 CHTY - ST - ZIP	Ft. Land, F1	33316
.ICF		DELETE	3 1 TITLE		Change Addition
MA			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
CHY ST-ZH. DALE		↑ DELETE	4 1 TITLE		Change Addition
NAMI			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City - St - ZiF			4 4 CITY - ST - ZIP		
THE F		☐ DELETE	5 1 TITLE		☐ Change ☐ Additio
14Mi			5 2 NAME		
SIPPLY ADDRESS			5.3 STREET ADDRESS		
CITY-\$T-ZIP		DELFTE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
Tille NAM:		LJ beer e	6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
DC 4 CT 2/2			6.4 CitY+ST+ZiP		
14. I do hereb		uat report or supplemental annu oration or the receiver or trustee	al report is true and accu empowered to execute t	y for the exemption stated in Section 11 trate and that my signature shall have th this report as required by Chapter 607, I	

SIGNATURE:

REBFICA J. Covey 1-31-96