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Mar 26 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000001823 (2)

1. Corporation Name
TUMPSON & CHARCHAT, P.A.

Principal Place of Business

848 BRICKELL AVENUE
SUITE 400
MIAMI FL 33131

Mailing Address

848 BRICKELL AVENUE
SUITE 400
MIAMI FL 33131-2915

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

TUMPSON, JOAN B
848 BRICKELL AVENUE
SUITE 400
MIAMI FL 33131

3. Date Incorporated or Qualified
01/04/1993

3a. Date of Last Report
08/08/1996

4. FEI Number

65-0380981

Applied for
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

(Note: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
DPT
TUMPSON, JOAN B
848 BRICKELL AVENUE SUITE 400
MIAMI FL
2. TITLE
NAME
DVPS
CHARCHAT, STEVEN M
848 BRICKELL AVENUE SUITE 400
MIAMI FL

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY - ST - ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
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93. TITLE
94. NAME
95. STREET ADDRESS
96. CITY - ST - ZIP
97. TITLE
98. NAME
99. STREET ADDRESS
100. 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 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Steve Charchat, Jr. 3/19/97 (305) 358-8005

CR2E034 (9/96)