SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000009846 (5

1. Corporation Name CHERYL R. EISEN, P.A. Mailing Address Principal Place of Business 433 PLAZA REAL SUITE 275. MIZNER PARK 433 PLAZA REAL SUITE 275. MIZNER PARK **BOCA RATON FL 33432 BOCA RATON FL 33432** 3a. Date of Last Report 3. Date Incorporated or Qualified 03/21/1995 02/03/1993 4, FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0380878 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 e **≱**ix under s. 199 032 Country 8. This corporation has liab lity for intangu Zin Žιρ Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 EISEN, CHERYL R Street Address (P.O. Box Number is Not Acceptable) **433 PLAZA REAL** SUITE 275, MIZNER PARK 83 **BOCA RATON FL 33432** Zip Code 85 City 84 11. Pursuant to the previsions 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 register of agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the approximation are registered agent if am lagranging and accept the approximation of Section 607,0505, Florida Statutes. SIGNATURE [NOTE Registered Agent signature required when remarking) g. Sered agort and title Capplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3.6)OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1.1066 TITLE CR2E034 EISEN. CHERYL R 1.2 NAME NAME 13 STREET ADDRESS 433 PLAZA REAL STREET ADDRESS **BOCA RATON FL 33432** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST. ZIP CITY-ST-ZIP Change Addition DELETE 3 LITHTLE TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-SI-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - 7IP CITY-ST-ZIP Change Addition DLLETE 5.1 THILE TULE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CHY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 6.1 T:TLE TITLE 6.2 NAME NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 affilier or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 13 if changed or or an attachment with an address.

6 3 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

FRICER OR DIRECTOR

6/8/96 407-362-5200

0091431 CP