

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

**95 MAY - 1 AM 10: 35**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**DOCUMENT # P93000043290 (4)**

1. Corporation Name

**ALAN FRANKEL & ASSOCIATES, P.A.**

Principal Place of Business

**12720 SW 114TH AVE  
SUITE B-230  
MIAMI FL 33176  
US**

Mailing Address

**12720 SW 114TH AVE  
SUITE B-230  
MIAMI FL 33176  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/12/1993**

3a. Date of Last Report

**05/01/1994**

4. FEI Number

**65-0419252**

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

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**HOMER, JEFFREY  
5310 N.W. 33RD AVE.  
SUITE 119  
LAUDERDALE FL 33309**

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 607.1508, 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 607.0905, Florida Statutes.

SIGNATURE

Signature of the principal officer, director, or other person authorized to execute this report.

Signature of the Registered Agent (signature required after first filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>DP</b>
NAME	<b>FRANKEL, ALAN</b>
STREET ADDRESS	<b>12720 SW 114TH AVE</b>
CITY, ST, ZIP	<b>MIAMI FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12	NAME	
13	STREET ADDRESS	
14	CITY, ST, ZIP	
15	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
16	NAME	
17	STREET ADDRESS	
18	CITY, ST, ZIP	
19	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
20	NAME	
21	STREET ADDRESS	
22	CITY, ST, ZIP	
23	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24	NAME	
25	STREET ADDRESS	
26	CITY, ST, ZIP	
27	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
28	NAME	
29	STREET ADDRESS	
30	CITY, ST, ZIP	

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 110.07(3)(b), 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 of this attachment with an address.

SIGNATURE:

*Alan Frankel*  
**Alan Frankel**

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

*4/26/95*  
DATE

*(805)  
595-4222*  
TELEPHONE NUMBER