

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

FILED

Jan 23 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 # P94000001650 (8)

1. Corporation Name  
JORGE LUIS WOLF, P.A.



Principal Place of Business  
1031 N. MIAMI BEACH BLVD.  
NORTH MIAMI BEACH FL 33162

Mailing Address  
1031 N. MIAMI BEACH BLVD.  
NORTH MIAMI BEACH FL 33162-3842

3. Date Incorporated or Qualified: 01/07/1994  
3a. Date of Last Report: 04/24/1996

2. Principal Place of Business

21 TURNBERRY PLAZA #500  
Suite, Apt. #, etc.

22 2875 NE 191 ST  
City & State

23 AVENTURA, FL  
Zip Country

24 33180 USA

2a. Mailing Address

26 TURNBERRY PLAZA #500  
Suite, Apt. #, etc.

27 2875 NE 191 ST  
City & State

28 AVENTURA, FL  
Zip Country

29 33180 USA

4. FEI Number: 65-0459310  
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

9. Name and Address of Current Registered Agent

WOLF, JORGE L  
1031 N. MIAMI BEACH BLVD.  
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name: WOLF, JORGE L  
82 Street Address (P.O. Box Number is Not Acceptable): TURNBERRY PLAZA #500  
83 2875 NE 191 ST  
84 City: AVENTURA FL 85 Zip Code: 33180

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: JORGE LUIS WOLF  
Signature type for performance of registered agent and tax filing (if applicable)

NOTE: Registered Agent signature required when reinstating

1/13/97  
DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME          | STREET ADDRESS            | CITY - ST - ZIP         | DELETE                   |
|-------|---------------|---------------------------|-------------------------|--------------------------|
| PSD   | WOLF, JORGE L | 1031 N. MIAMI BEACH BLVD. | N. MIAMI BEACH FL 33162 | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |
|       |               |                           |                         | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME      | 1.3 STREET ADDRESS   | 1.4 CITY - ST - ZIP | 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP |
|-----------|---------------|----------------------|---------------------|-----------|----------|--------------------|---------------------|-----------|----------|--------------------|---------------------|-----------|----------|--------------------|---------------------|-----------|----------|--------------------|---------------------|-----------|----------|--------------------|---------------------|
| PSD       | WOLF, JORGE L | 2875 NE 191 ST, #500 | AVENTURA, FL 33180  |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |
|           |               |                      |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |           |          |                    |                     |

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 included 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: JORGE LUIS WOLF  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/97 305937-0300  
DATE Daytime Phone #

CR2E034 (9/96)