FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
1995 MAR -9 AM 6:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000006356

1. Corporation Name
MICHAEL A. USAN, P.A.

Principal Place of Business	Mailing Address
3000 NE 30TH PLACE, SUITE 306 FORT LAUDERDALE, FLORIDA 33306	3000 NE 30th PLACE, SUITE 306 Fort Lauderdale, FL 33306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01-01-94
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 6000 SOUTHWEST 4TH AVENUE	26 P.O. BOX 14305
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 FORT LAUDERDALE, FLORIDA	City & State 28 FORT LAUDERDALE, FLORIDA
Zip / Country 24 33315 / 25 USA	Zip / Country 29 33301 / 30 USA

4. FEI Number: 65-0460219 ☐ 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	10. Name and Address of New Registered Agent
MICHAEL A. USAN 3000 NE 30 PLACE, SUITE 306 FORT LAUDERDALE, FLORIDA 33306	81 Name: MICHAEL A. USAN 82 Street Address (P.O. Box Number is Not Acceptable): 6000 SOUTHWEST 4TH AVENUE 83 84 City: FORT LAUDERDALE FL 85 Zip Code: 33315

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: Michael A. Usan — MICHAEL A. USAN, PRESIDENT/CEO — 01/20/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	11 TITLE	P/T/S/D/C ☒ Change ☐ Addition
NAME	MICHAEL A. USAN	12 NAME	MICHAEL A. USAN
STREET ADDRESS	2591 NW 87TH DRIVE	13 STREET ADDRESS	2591 NW 87TH DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FLORIDA 33065	14 CITY-ST-ZIP	CORAL SPRINGS, FLORIDA 33065
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	000001426090
STREET ADDRESS		33 STREET ADDRESS	-03/10/95--01037--020
CITY-ST-ZIP		34 CITY-ST-ZIP	****200.00 ****200.00
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	DEAD 3-15
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael A. Usan — MICHAEL A. USAN — 01-20-95 — (305) 461-4055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #