

FILE NOW: FILING FEE AFTER MAY 1 IS \$550

FILED

Jun 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000047852 (6)

1. Corporation Name
LAW OFFICES OF SALLY N. SAWH, A PROFESSIONAL ASSOCIATION



Principal Place of Business

1054 KANE CONCOURSE
BAY HARBOR FL 33154

Mailing Address

1054 KANE CONCOURSE
BAY HARBOR FL 33154-2107

3. Date Incorporated or Qualified
06/22/1994

3a. Date of Last Report
10/04/1996

2. Principal Place of Business

21 Same as above
Suite, Apt. #, etc.

2a. Mailing Address

26 Same as above
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

CY

24

25

29

30

9. Name and Address of Current Registered Agent

SAWH, SALLY N
1054 KANE CONCOURSE
BAY HARBOR FL 33154

4. FEI Number
65-0507871

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

31 Name

N/A

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

33

34 City

FL

35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
SAWH, SALLY N
1054 KANE CONCOURSE
BAY HARBOR FL 33154

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

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STREET ADDRESS
CITY - ST - ZIP

Change Addition

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DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Change Addition

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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE

CR2E034 (9/96)