FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

FILED

DOCUMENT # P94000077371 (0)

1. Corporation Name

DUVAL CENTER, INC.

Principal Place of Business	Mailing Address
107 DUVAL STREET KEY WEST FL 33040	107 DUVAL STREET KEY WEST FL 33040

2. Principal Place of Business

21

Street Address

22

City & State

23

Zip 24 | County 25

2a. Mailing Address

26

Street Address

27

City & State

28

Zip 29 | County 30

3. Date of Incorporation/Qualification: 10/19/1994

3a. Effective Filing Date

4. FEI Number: 65-0529381 [ ] 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 corporate tax under § 220.02, Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

KOHEN, AMOS
107 DUVAL STREET
KEY WEST FL 33040

10. Name and Address of New Registered Agent

01 Name

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

03

04 City | FL | 05 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
KOHEN, AMOS
107 DUVAL STREET
KEY WEST FL 33040

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1 Title
1 Name
1 Street Address
1 City-St-Zip

[ ] Change [ ] Addition

2 Title
2 Name
2 Street Address
2 City-St-Zip

[ ] Change [ ] Addition

3 Title
3 Name
3 Street Address
3 City-St-Zip

[ ] Change [ ] Addition

4 Title
4 Name
4 Street Address
4 City-St-Zip

[ ] Change [ ] Addition

5 Title
5 Name
5 Street Address
5 City-St-Zip

[ ] Change [ ] Addition

6 Title
6 Name
6 Street Address
6 City-St-Zip

[ ] Change [ ] Addition

14. I hereby certify that the information supplied with this filing is validly furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 with an address, with an asterisk (*) before each entry.

SIGNATURE: 2/14/95

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL

Date