

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

FILED
Apr 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000086024 (4)

1. Corporation Name

DELGADO, BEFELER, STARKMAN & MAGOLNICK, P.A.



Principal Place of Business 150 WEST FLAGLER STREET STE. 2701 MUSEUM TOWER MIAMI FL 33130	Mailing Address 150 WEST FLAGLER STREET STE. 2701 MUSEUM TOWER MIAMI FL 33130
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 100 SE 2nd Street Suite, Apt. #, etc. 22 # 3700 City & State 23 Miami, FL Zip 24 33131		2a. Mailing Address 26 100 SE 2nd Street Suite, Apt. #, etc. 27 # 3700 City & State 28 Miami, FL Zip 29 33131		3. Date Incorporated or Qualified 11/23/1994	
25 USA		30 USA		4. FEI Number 65-0611580	
25 USA		30 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 USA		30 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 USA		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BEFELER, GEORGE
~~150 WEST FLAGLER STREET STE. 2701~~
~~MUSEUM TOWER~~
~~MIAMI FL 33130~~

10. Name and Address of New Registered Agent

81 Name George Befeler
82 Street Address (P.O. Box Number is Not Acceptable)
100 SE 2nd Street
83 Suite 3700, Nationsbank Tower
84 City Miami, FL
85 Zip Code 33131

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

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

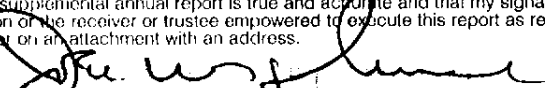
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	DELGADO, LUIS E	1.2 NAME	Delgado, Luis E
STREET ADDRESS	150 WEST FLAGLER STREET STE. 2701	1.3 STREET ADDRESS	100 SE 2nd Street, # 3700
CITY-ST-ZIP	MIAMI FL 33130	1.4 CITY-ST-ZIP	Miami, FL. 33131
TITLE	D	2.1 TITLE	D
NAME	BEFELER, GEORGE	2.2 NAME	Befeler, George
STREET ADDRESS	150 WEST FLAGLER STREET STE. 2701	2.3 STREET ADDRESS	100 SE 2nd Street, # 3700
CITY-ST-ZIP	MIAMI FL 33130	2.4 CITY-ST-ZIP	Miami, FL. 33131
TITLE	D	3.1 TITLE	D
NAME	STARKMAN, JAY	3.2 NAME	Starkman, Jay
STREET ADDRESS	150 WEST FLAGLER STREET STE. 2701	3.3 STREET ADDRESS	100 SE 2nd Street, # 3700
CITY-ST-ZIP	MIAMI FL 33130	3.4 CITY-ST-ZIP	Miami, FL. 33131
TITLE	D	4.1 TITLE	D
NAME	MAGOLNICK, JOEL S	4.2 NAME	Magolnick, Joel
STREET ADDRESS	150 WEST FLAGLER STREET STE. 2701	4.3 STREET ADDRESS	100 SE 2nd Street, # 3700
CITY-ST-ZIP	MIAMI FL 33130	4.4 CITY-ST-ZIP	Miami, FL. 33131
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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



3/26/98

205 370 0300

CR2E034 (10/97)