FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS (6)

1. Corporation Name	F94000093047	1

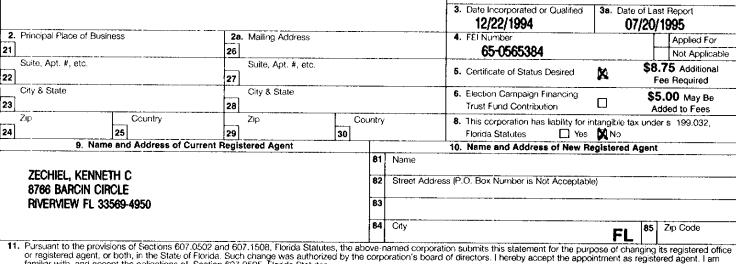
KEN ZECHIEL, P.A.

Principal Place o	f Business
-------------------	------------

Mailing Address

8766 BARCIN CIRCLE **RIVERVIEW FL 33569-4950**

8766 BARCIN CIRCLE RIVERVIEW FL 33569-4950



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 printrid name of registered agent and title		OTE: Registered Agent signature required	when reinstating) DA*E	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12
TITLE	<u>P</u>	□ DELETE	1. 1 THILE	Change	Addition
NAME	ZECHIEL, KENNETH C		1.2 NAME		
STREET ADDRESS	8766 BARCIN CIRCLE		1 3 STREET ADDRESS		
C(TY-S) - ZIP	RIVERVIEW FL 33569-4950		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2. 1 THTLE	Change	☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			24 CITY-ST-ZIP		
TITLE		DELETE	3. 1 TITLE	☐ Change	☐ Addition
NAME			3 2 NAME		
STREET ADORESS			3.3. STREET ADDRESS		
CITY+S1-ZIP			34 CITY - ST - ZIP		
TITLE		☐ DEFELE	4. 1 TITLE	Change	■ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5. 1 TITLE	☐ Change	☐ Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6. 1 TITLE	☐ Change	☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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)(k). 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.

CRZE034 (12/95)