

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000015388 (8)

1. Corporation Name
ALICE KELLOGG, P.A.



Principal Place of Business: **8600 N.E. 10TH COURT MIAMI FL 33138**
Mailing Address: **8600 N.E. 10TH COURT MIAMI FL 33138**

3. Date Incorporated or Qualified: **02/23/1995** 3a. Date of Last Report
4. FEI Number: **65-0571096** 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

2. Principal Place of Business: 21 Subd., Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Subd., Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
**ADLER, MITCHELL D.
500 EAST BROWARD BLVD.
SUITE 1950
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent
81 Name: **ALICE KELLOGG**
82 Street Address (P.O. Box Number is Not Acceptable): **8600 NE 10TH CT.**
83
84 City: **MIAMI** FL 85 Zip Code: **33138**

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: *Alice Kellogg* DATE: **2/15/96**

12. OFFICERS AND DIRECTORS

1	<input type="checkbox"/> DELETE	D KELLOGG, ALICE 8600 N.E. 10TH COURT MIAMI FL 33138
2	<input type="checkbox"/> DELETE	
3	<input type="checkbox"/> DELETE	
4	<input type="checkbox"/> DELETE	
5	<input type="checkbox"/> DELETE	
6	<input type="checkbox"/> DELETE	
7	<input type="checkbox"/> DELETE	
8	<input type="checkbox"/> DELETE	
9	<input type="checkbox"/> DELETE	
10	<input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.1 TITLE
2		1.2 NAME
3		1.3 STREET ADDRESS
4		1.4 CITY - ST - ZIP
5	<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.1 TITLE
6		2.2 NAME
7		2.3 STREET ADDRESS
8		2.4 CITY - ST - ZIP
9	<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.1 TITLE
10		3.2 NAME
11		3.3 STREET ADDRESS
12		3.4 CITY - ST - ZIP
13	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.1 TITLE
14		4.2 NAME
15		4.3 STREET ADDRESS
16		4.4 CITY - ST - ZIP
17	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5.1 TITLE
18		5.2 NAME
19		5.3 STREET ADDRESS
20		5.4 CITY - ST - ZIP
21	<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.1 TITLE
22		6.2 NAME
23		6.3 STREET ADDRESS
24		6.4 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)(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.

SIGNATURE: *Alice Kellogg* DATE: **2/15/96** (305) **757-3131**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **ALICE KELLOGG**

CR2E034 (12/95)