

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

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 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**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1293 NE 95 ST	26	1293 NE 95 ST	02/23/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				65-0571096	
City & State		City & State		5. Certificate of Status Desired	
MIAMI SHORES, FL.		MIAMI SHORES, FL.		<input type="checkbox"/> \$8.75 Additional Fee Required	
24	Zip 33138	25	Country DADE	6. Election Campaign Financing Trust Fund Contribution	
29	Zip 33138	30	Country DADE	<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
KELLOGG, ALICE 8600 NE 10TH CT MIAMI FL 33138				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
KELLOGG, ALICE 8600 NE 10TH CT MIAMI FL 33138				81	Name ALICE KELLOGG			
				82	Street Address (P.O. Box Number is Not Acceptable) 1293 NE 95 ST.			
				83				
				84	City MIAMI SHORES	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* **ALICE KELLOGG** DATE **1/8/98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KELLOGG, ALICE			1.2 NAME	KELLOGG, ALICE		
STREET ADDRESS	8600 N.E. 10TH COURT			1.3 STREET ADDRESS	1293 NE 95 ST.		
CITY-ST-ZIP	MIAMI FL 33138			1.4 CITY-ST-ZIP	MIAMI SHORES, FL. 33138		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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: *Alice Kellogg* **ALICE KELLOGG** 1/8/98 305 757-3131

CR2E034 (10/97)