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Mar 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000023932 (3)

1. Corporation Name

AFFILIATED FINANCIAL CORPORATION

Principal Place of Business

3900 HOLLYWOOD BLVD.  
SUITE 303  
HOLLYWOOD FL 33021

Mailing Address

3900 HOLLYWOOD BLVD.  
SUITE 303  
HOLLYWOOD FL 33021-6732

3. Date Incorporated or Qualified  
03/24/1995

3a. Date of Last Report  
04/25/1996

2. Principal Place of Business

21 3900 hollywood blvd.

2a. Mailing Address

26 3900 Hollywood Blvd.

22 Suite 201

27 Suite 201

23 Hollywood, FL 33021

28 Hollywood, FL 33021-6732

24 Zip Country

29 Zip Country

25 USA

30 USA

9. Name and Address of Current Registered Agent

JACOBS, DOUGLAS  
3900 HOLLYWOOD BLVD.  
SUITE 303  
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 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

Signature of registered agent or president of agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	JACOBS, DOUGLAS	3900 HOLLYWOOD BLVD., STE. 303	HOLLYWOOD FL 33021	<input type="checkbox"/>
D	REYF, ALAN	3900 HOLLYWOOD BLVD., STE. 303	HOLLYWOOD FL 33021	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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:

*[Signature]* Director  
DOUGLAS J. JACOBS, Director

3/12/97 954-893-0400

Date

Daytime Phone #

0130266

CR2E034 (9/96)