

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 # P95000034502 (1)

1. Corporation Name

ALAN H. ARONSON, P.A.



Principal Place of Business

201 S. BISCAYNE BLVD.
SUITE 3000
MIAMI FL 33131

Mailing Address

201 S. BISCAYNE BLVD.
SUITE 3000
MIAMI FL 33131

3. Date Incorporated or Qualified

05/03/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 770 Cloughton Isl Dr

26 770 Cloughton Isl Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 1203

27 # 1203

City & State

City & State

23 MIAMI FL

28 MIAMI FL

Zip

Zip

24 33131

29 33131

Country

25 USA

Country

30 USA

9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES INC.
201 S. BISCAYNE BLVD.
SUITE 3000
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name Alan H. Aronson
82 Street Address (P.O. Box Number is Not Acceptable)
One Southeast Third Avenue
83 28th Floor
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

Alan H. Aronson

4-14-96

NOTICE: Registered Agent Signature must be provided in this block.

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ARONSON, ALAN H	
STREET ADDRESS	201 S. BISCAYNE BLVD., SUITE 3000	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	President and Director	☒ Change ☐ Addition
2. NAME	Alan H. Aronson	
3. STREET ADDRESS	770 Cloughton Isl Dr #1203	
4. CITY-ST-ZIP	MIAMI, FLA 33131	
2. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-ST-ZIP		
3. TITLE		☐ Change ☐ Addition
3. NAME		
4. STREET ADDRESS		
5. CITY-ST-ZIP		
4. TITLE		☐ Change ☐ Addition
4. NAME		
5. STREET ADDRESS		
6. CITY-ST-ZIP		
5. TITLE		☐ Change ☐ Addition
5. NAME		
6. STREET ADDRESS		
7. CITY-ST-ZIP		
6. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. 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:

Alan H. Aronson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-96

305-374-5600

(Date)

(Telephone Number)

CR2E034 (12/95)