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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000011110 (9)

MICHELE J. HODKIN, P.A.

Principal Place of Business

Mailing Address

## **FILED** Feb 14 1997 8:00am Secretary of State



Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.	1900 CORPORATE BLVD NW SUITE 301 W BLDG BOCA RATON FL 33431  1900 CORPORATE BLVD NW SUITE 301 W BLDG BOCA RATON FL 33431 BOCA RATON FL 33431-8502									_
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HODKIN, MICHELE J 1900 CORPORATE BLVD NW SURTE 301 W BLDG BOCA RATON FL 33431  11. Fursuant to the provisions of Sections 607:0502 and 607:1508, Florida Statutes, the above-named corporation automits this statement for the purpose of changing its registered eigent, 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, 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, and accept the obligations of, Section 607:0505, Florida Statutes.  SIGNATURE  Spray as space a prince dame of 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						Florida Statutes	Yes	No	s. 199.032,	
11. Fursional 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 agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  Signification of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  Signification of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  Signification of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  DELETE 1.1 TITLE		g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Ag	ènt		1
SUITE 301 W BLDG BOCA RATON FL 33431  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 agent, or both in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. In a familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12 MANE  SIRET ADDRESS  CITY 51-ZIP  1900 CORPORATE BLVD NW SUITE 301  13. SIRET ADDRESS  CITY 51-ZIP  10. DELETE  11. TITLE  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. SIRET ADDRESS  CITY 51-ZIP  14. CITY 51-ZIP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. SIRET ADDRESS  CITY 51-ZIP  16. Change Addition  AME  16. SIRET ADDRESS  17. SIRET ADDRESS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDIT	HODKIN, MICHELE J				Name					
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SIGNATURE	office or re	egistered agent, or both, in the Sta	ite of Florida. Such change was auth	norized by	y the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of chot the appoin	anging tment a	its registered s registered	
12.   OFFICERS AND DIRECTORS   18.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
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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