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FILED
Oct 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northcutt Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000012201 1. Corporation Name DiRocco, Dombrow & Associates, P.A.			
Principal Place of Business 3601 West Commercial Blvd Suite #22 Fort Lauderdale, FL 33309		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 SAME		2a. Mailing Address 26	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.	
23 City & State		28 City & State	
24 Zip		29 Zip	
25 Country		30 Country	
9. Name and Address of Current Registered Agent Raymond M. DiRocco 3601 W. Commercial Blvd Suite #22 Fort Lauderdale, FL 33309		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: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PRESIDENT 1.2 NAME RAYMOND M. DiRocco 1.3 STREET ADDRESS 3601 W COMM. BLVD #111 1.4 CITY-ST-ZIP FT LAUDERDALE FL 33309		1.1 TITLE Secretary/Treasurer/Director 1.2 NAME Allan B. Dombrow 1.3 STREET ADDRESS 3601 W. Commercial Blvd 1.4 CITY-ST-ZIP FT. Lauderdale, FL 33309	
2.1 TITLE [] DELETE 2.2 NAME [] DELETE 2.3 STREET ADDRESS [] DELETE 2.4 CITY-ST-ZIP [] DELETE		2.1 TITLE [] Change [] Addition 2.2 NAME [] Change [] Addition 2.3 STREET ADDRESS [] Change [] Addition 2.4 CITY-ST-ZIP [] Change [] Addition	
3.1 TITLE [] DELETE 3.2 NAME [] DELETE 3.3 STREET ADDRESS [] DELETE 3.4 CITY-ST-ZIP [] DELETE		3.1 TITLE [] Change [] Addition 3.2 NAME [] Change [] Addition 3.3 STREET ADDRESS [] Change [] Addition 3.4 CITY-ST-ZIP [] Change [] Addition	
4.1 TITLE [] DELETE 4.2 NAME [] DELETE 4.3 STREET ADDRESS [] DELETE 4.4 CITY-ST-ZIP [] DELETE		4.1 TITLE [] Change [] Addition 4.2 NAME [] Change [] Addition 4.3 STREET ADDRESS [] Change [] Addition 4.4 CITY-ST-ZIP [] Change [] Addition	
5.1 TITLE [] DELETE 5.2 NAME [] DELETE 5.3 STREET ADDRESS [] DELETE 5.4 CITY-ST-ZIP [] DELETE		5.1 TITLE [] Change [] Addition 5.2 NAME [] Change [] Addition 5.3 STREET ADDRESS [] Change [] Addition 5.4 CITY-ST-ZIP [] Change [] Addition	
6.1 TITLE [] DELETE 6.2 NAME [] DELETE 6.3 STREET ADDRESS [] DELETE 6.4 CITY-ST-ZIP [] DELETE		6.1 TITLE [] Change [] Addition 6.2 NAME [] Change [] Addition 6.3 STREET ADDRESS [] Change [] Addition 6.4 CITY-ST-ZIP [] Change [] Addition	
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: Raymond M. DiRocco			

CR2E034 (10/97)