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Apr 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014156 (9)

1. Corporation Name

D'ASSARO AND HALL, P.A.



Principal Place of Business 541 SOUTH ORLANDO AVENUE SUITE 308 MAITLAND FL 32751	Mailing Address 541 SOUTH ORLANDO AVENUE SUITE 308 MAITLAND FL 32751-5669
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2. Principal Place of Business 21 20 N. ORANGE AVE Suite, Apt. #, etc. 22 SUITE 1107 City & State 23 ORLANDO, FLORIDA Zip 24 32801		2a. Mailing Address 26 20 N. ORANGE AVE. Suite, Apt. #, etc. 27 SUITE 1107 City & State 28 ORLANDO, FLORIDA Zip 29 32801		3. Date Incorporated or Qualified 02/14/1996		3a. Date of Last Report	
				4. FEI Number 59-3365516		Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent D'ASSARO, VINCENT 541 SOUTH ORLANDO AVENUE SUITE 308 MAITLAND FL 32751				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 20 N. ORANGE AVENUE 83 SUITE 1107 84 City ORLANDO 85 Zip Code FL 32801			
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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: VINCENT D'ASSARO, PRES. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE D 1.2 NAME D'ASSARO, VINCENT 1.3 STREET ADDRESS 541 SOUTH ORLANDO AVENUE, SUITE 308 1.4 CITY-ST-ZIP MAITLAND FL 32751				1.1 TITLE PD 1.2 NAME 1.3 STREET ADDRESS 20 N. ORANGE AVENUE SUITE 1107 1.4 CITY-ST-ZIP ORLANDO, FLORIDA 32801			
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP				2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP				3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			

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: VINCENT D'ASSARO, PRES. 3/27/97 (407) 843-7404

CR2E034 (9/96)