


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

**FILED**  
**Jan 30 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000024370 (4)**  
 1. Corporation Name  
**ANDRES BOLANO, JR., C.P.A.'S, P.A.**



Principal Place of Business <del>3200 PONCE DE LEON BLVD</del> <del>2ND FL</del> <del>CORAL GABLES FL 33134</del> <del>US</del>	Mailing Address <del>3200 PONCE DE LEON BLVD</del> <del>2ND FL</del> <del>CORAL GABLES FL 33134</del> <del>US</del>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>134 Madeira Ave</b> Suites, Apt. #, etc. 22 City & State 23 <b>Coral Gables, FL</b> Zip 24 <b>33134</b> Country 25 <b>Miami-Dade</b>	2a. Mailing Address 26 <b>134 Madeira Ave</b> Suite, Apt. #, etc. 27 City & State 28 <b>Coral Gables, FL</b> Zip 29 <b>33134</b> Country 30 <b>Miami-Dade</b>
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3. Date Incorporated or Qualified <b>03/14/1996</b>	4. FEI Number <b>65-0670042</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**BOLANO, ANDRES JR.**  
~~3200 PONCE DE LEON BLVD 2ND FL~~  
~~CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent  
 81 Name **Andres Bolano Jr.**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**134 Madeira Ave**  
 83  
 84 City **Coral Gables** **FL** 85 Zip Code **33134**

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 Andres Bolano Jr. DATE 1/26/98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>BOLANO, ANDRES</b>
STREET ADDRESS	<del>3200 PONCE DE LEON BLVD 2ND FL</del>
CITY-ST-ZIP	<del>CORAL GABLES FL</del>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>134 Madeira Ave</b>
1.4 CITY-ST-ZIP	<b>Coral Gables, FL 33134</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 Andres Bolano Jr. DATE 1/26/98

CR2E034 (10/97)