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

Mailing Address

6600 CODY ST.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

8600 CODY ST.

CITY-ST-ZIP

appears in Block 12 or Block 13 if changed, or on an attachment with an address



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000048702 (0)

AUDIOLOGY ASSOCIATES OF BOCA RATON, INC.

HOLLYWOOD FL 33024-2935 HOLLYWOOD FL 33024 3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-06725 Not Applicable 2831 N. Federal 26 Suite Apt. #. etc. \$8.75 Additional Suite Apt. #, etc 5. Certificate of Status Desired Fee Required #11 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Boca Katon Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name JUSTICE, EDWARD 6600 CODY ST. Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33024 83 Zip Code 84 City 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 product name of registered agent and to of applicable. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 13. 12. DELETE Change ___ Addition 1.1 TITLE TITLE JUSTICE, EDWARD 1.2 NAME NAME 6600 CODY ST. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33024 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 21 THILE TITLE JUSTICE, MEUSSA 22 NAME NAME 6600 CODY ST. 2.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33024 2 4 CITY-ST-ZIP CITY-SI-7P DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY-ST-ZIP Addition DELETE Change 4.1 TITLE THUE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZiP CITY-ST-ZIP Addition DELETE Change 5.1 THLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY - ST-ZIP CITY- ST. ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME **6 3 STREET ADDRESS** STREET ADDRESS

64 CITY-ST-ZIP

pard Justice 1-3-97 561-392-0020

14. I do hereby certify that the information supplied with this filling 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

FILED Jan 14 1997 8:00am Secretary of State

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