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

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR 11 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000048702

1. Corporation Name
Audiology Associates of Boca Raton, Inc.

Principal Place of Business
2831 N. Federal Hwy.
Boca Raton, FL
33431

Mailing Address
2831 N. Federal Hwy.
Boca Raton, FL
33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
6/4/96

4. FEI Number
65-0672559
[ ] Applied For
[ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc	Suite, Apt. #, etc
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

9. Name and Address of Current Registered Agent
Edward Justice
6600 Cody St.
Hollywood, FL 33024

10. Name and Address of New Registered Agent
81 Name: Ross K. Stone
82 Street Address (P.O. Box Number is Not Acceptable)
12470 SW 7th Place
83
84 City: Davie FL 85 Zip Code: 33325

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: Ross K Stone — Ross K. Stone President — 3-5-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when changing) — Date

12. OFFICERS AND DIRECTORS		
TITLE	P	X DELETE
NAME	Edward Justice	
STREET ADDRESS	6600 Cody St.	
CITY-ST-ZIP	Hollywood, FL 33024	
TITLE	V	X DELETE
NAME	Melissa Justice	
STREET ADDRESS	6600 Cody St.	
CITY-ST-ZIP	Hollywood, FL 33024	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	Assident	X Change [ ] Add
12 NAME	Ross K Stone	
13 STREET ADDRESS	12470 SW 7th Place	
14 CITY-ST-ZIP	Davie FL 33325	
21 TITLE		[ ] Change [ ] Add
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		[ ] Change [ ] Add
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[ ] Change [ ] Add
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Add
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Add
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

800002810918-1 (AMEND)
-03/18/99--01084--014
*****61.25 *****61.25

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: Ross K Stone — Ross K Stone President — 3-5-99 — 561 392-0020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number