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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100803 (1)

MORTON MORRIS, D.O., J.D., P.A.

Principal Place of Business Mailing Address 512 PALM DRIVE 512 PALM DRIVE HALLANDALE FL 33009 HALLANDALE FL 33009-8534 3. Date Incorporated or Qualified 3a. Date of Last Report 12/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0714811 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees ZiD Country Ζip Country 8. This corporation has liability for intangible tax under s. 199,032, KYes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MORRIS, MORTON **512 PALM DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) HALLANDALE FL 33009 В3 City 84 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 (NOTE: Registered Agent signature required when reinstating) DATE Styrature, typed or printed range of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE Tall# MORRIS. MORTON NAME 12 NAME 512 PALM DRIVE STREET ADDRESS 13 STREET ADDRESS HALLANDALE FL 33009 1.4 City - St - 7iP CITY - ST-ZIF Change DELETE Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS

64 CITY-ST-ZIP CITY-ST-7-P 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 Statules. 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.

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4-16-97 (954) 262-1746
Dave Phone - CO

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Apr 29 1997 8:00am

Secretary of State

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