SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S84546** **(8)**

1. Corporation Name
KAPETANAKIS & PETIT, P.A.

Principal Place of Business	Mailing Address
7000 S.W. 62 AVENUE PENTHOUSE B SOUTH MIAMI FL 33143	7000 S.W. 62 AVENUE PENTHOUSE B SOUTH MIAMI FL 33143

3. Date Incorporated or Qualified: 10/02/1991
3a. Date of Last Report: 06/14/1995

2. Principal Place of Business	2a. Mailing Address
21 19 West Flagler St.	26 19 West Flagler Street
Suite, Apt. #, etc. 22 707	Suite, Apt. #, etc. 27 707
City & State 23 MIAMI FL.	City & State 28 MIAMI FL.
Zip 24 33130 Country 25 U.S.	Zip 29 33130 Country 30 US

4. FEI Number: 65-0293296 ☐ 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 has liability for intangible tax under s. 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
KAPETANAKIS, ALEXANDER
7000 S.W. 62 AVENUE PENTHOUSE B
SOUTH MIAMI FL 33143

10. Name and Address of New Registered Agent
81 Name: SAME
82 Street Address (P.O. Box Number is Not Acceptable): 19 West Flagler St.
83 Suite 707
84 City: MIAMI FL 85 Zip Code: 33130

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: Alexander KAPETANAKIS DATE: 8-7-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when filing.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	Same	☑ Change ☐ Addition
NAME	KAPETANAKIS, ALEXANDER		1.2 NAME	Same	
STREET ADDRESS	7000 SW 62ND AVENUE, PHB		1.3 STREET ADDRESS	19 West Flagler St. #707	
CITY-ST-ZIP	SOUTH MIAMI FL		1.4 CITY-ST-ZIP	Miami Fla. 33130	
TITLE	D	☐ DELETE	2.1 TITLE	Same	☐ Change ☐ Addition
NAME	PETIT, MICHAEL GARCIA		2.2 NAME	Same	
STREET ADDRESS	7000 SW 62ND AVE., PHB		2.3 STREET ADDRESS	19 West Flagler St. #707	
CITY-ST-ZIP	SOUTH MIAMI FL		2.4 CITY-ST-ZIP	Miami Fl. 33130	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	100001931511 -08/26/96--01011--001 ***375.00	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (3/96)

CMC 8/27/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 8-7-96 305 5778985
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #