FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 PM 1:23

DOCUMENT # S97402 (9)

1. Corporate Name
STEVEN M. KANTOR, P.A.

Principal Place of Business
% STEVEN M. KANTOR
200 S. PINE ISLAND ROAD, SUITE 206
PLANTATION FL 33324

Mailing Address
% STEVEN M. KANTOR
200 S. PINE ISLAND ROAD, SUITE 206
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/02/1991
3a. Date of Last Report: 01/19/1994

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

4. FEI Number: 65-0293204 — 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
KANTOR, STEVEN M.
200 S. PINE ISLAND ROAD
SUITE 206
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 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 of Registered Agent or Registered Agent and Registered Office Change — Date

12. OFFICERS AND DIRECTORS
D
NAME: KANTOR, STEVEN M.
ADDRESS: 200 S. PINE ISLAND RD
CITY, ST, ZIP: PLANTATION FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

14. I hereby certify that the foregoing report and, if applicable, the accompanying amendment, has been duly adopted, or the corporation is authorized to have its officers and directors, in accordance with Chapter 607, Florida Statutes. I further certify that the annual report or supplemental annual report is true and correct and that my signature below is the same as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 above with an office held or in Block 13 above with an addition.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0231004 CP