

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V12236** (8)
1. Corporation Name:
ANTHONY D. HALL, C.P.A., P.A.



Principal Place of Business: **9200 S DADELAND BLVD STE 408 MIAMI FL 33156 US**
Mailing Address: **9200 S DADELAND BLVD STE 408 MIAMI FL 33156 US**

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-sections for Suite, Apt., etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: **02/06/1992**
3a. Date of Last Report: **07/17/1995**
4. FEI Number: **65-0308179**
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: **HALL, ANTHONY D. 9200 S DADELAND BLVD STE 408 MIAMI FL 33156**
10. Name and Address of New Registered Agent (81-85) fields: Name, Street Address, City, State (FL), Zip Code.

11. Pursuant to the provisions of Sections 607.0602 and 607.1103, 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE	CP	11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.2 NAME	HAY, ANTHONY D	11.2 NAME	
11.3 STREET ADDRESS	9200 S DADELAND BLVD #408	11.3 STREET ADDRESS	
11.4 CITY, ST, ZIP	MIAMI FL	11.4 CITY, ST, ZIP	
11.5 TITLE		11.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.6 NAME		11.6 NAME	
11.7 STREET ADDRESS		11.7 STREET ADDRESS	
11.8 CITY, ST, ZIP		11.8 CITY, ST, ZIP	
11.9 TITLE		11.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.10 NAME		11.10 NAME	
11.11 STREET ADDRESS		11.11 STREET ADDRESS	
11.12 CITY, ST, ZIP		11.12 CITY, ST, ZIP	
11.13 TITLE		11.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.14 NAME		11.14 NAME	
11.15 STREET ADDRESS		11.15 STREET ADDRESS	
11.16 CITY, ST, ZIP		11.16 CITY, ST, ZIP	
11.17 TITLE		11.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.18 NAME		11.18 NAME	
11.19 STREET ADDRESS		11.19 STREET ADDRESS	
11.20 CITY, ST, ZIP		11.20 CITY, ST, ZIP	

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)(k), 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 register 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.

SIGNATURE: **Anthony D. Hall, CEO** DATE: **1/31/96** TELEPHONE: **(305) 670-2301**

CR2E034 (12/95)