FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 12:20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V16868 (4)

1. Corporation Name

LEWIS F. MURPHY, P.A.

Principal Place of Business: 200 SOUTH BISCAYNE BLVD. SUITE 4000 MIAMI FL 33131

Mailing Address: 200 SOUTH BISCAYNE BLVD. SUITE 4000 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/25/1992

3a. Date of Last Report: 05/01/1994

4. FEI Number: 65-0319258 — 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

MURPHY, LEWIS F.
200 SOUTH BISCAYNE BLVD.
SUITE 4000
MIAMI FL 33131

10. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL 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

12. OFFICERS AND DIRECTORS

Title	
D	MURPHY, LEWIS F. 200 SOUTH BISCAYNE BLVD. MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I the undersigned, 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 the 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.

SIGNATURE: Lewis F Murphy 27APR95 305 577 2457

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — LEWIS F. MURPHY

0128360 CP