

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V23540** (0)
1. Corporation Name
ANALYTIC APPARATUS CORPORATION



Principal Place of Business 8073 NW 167 ST STE C-21 MIAMI FL 33015 US	Mailing Address 8061 JAMAICA DRIVE MIRAMAR FL 33023-2414
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3. Date Incorporated or Qualified 03/23/1992	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21. State, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. 5851 S.W. 163RD AVE. 27. Suite, Apt. #, etc. 28. FT LAUDERDALE, FL 29. Zip 30. 33331 25. Country
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4. FEI Number 65-0320336	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**ROTHERMEL, WILLIAM F.
2081 JAMAICA DRIVE
MIRAMAR FL 33023-2414**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
5851 S.W. 163RD AVE.
83.
84. City **FT LAUDERDALE** FL 85. Zip Code **33331**

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 _____

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	PT ROTHERMEL, WILLIAM F.
STREET ADDRESS	2081 JAMAICA DRIVE
CITY - ST - ZIP	MIRAMAR FL
TITLE	<input type="checkbox"/> DELETE
NAME	D ROTHERMEL, WILLIAM F.
STREET ADDRESS	2081 JAMAICA DRIVE
CITY - ST - ZIP	MIRAMAR FL
TITLE	<input type="checkbox"/> DELETE
NAME	S ROTHERMEL, BARBARA M
STREET ADDRESS	2081 JAMAICA DR
CITY - ST - ZIP	MIRAMAR FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	5851 S.W. 163RD AVE
1.4 CITY - ST - ZIP	FT LAUDERDALE, FL 33331
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	SAME AS ABOVE
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	SAME AS ABOVE
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **WILLIAM F. ROTHERMEL** *William F. Rothermel* 4/6/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
(954) 252-0375 Date 4/6/97 Daytime Phone # 0131594

CR2E034 (9/96)