

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

FILED

Jan 28 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 # **V43648** (7)
1. Corporation Name
BARBIERI & SCRENCI, P.A.



Principal Place of Business 7000 W. PALMETTO PARK SUITE 409 BOCA RATON FL 33433	Mailing Address 7000 W. PALMETTO PARK SUITE 409 BOCA RATON FL 33433-3425
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3. Date Incorporated or Qualified 06/11/1992	3a. Date of Last Report 04/19/1996
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2. Principal Place of Business 21 3200 N. Military Trail Suite, Apt #, etc 22 Suite 200 City & State 23 Boca Raton, FL Zip 24 33431	2a. Mailing Address 26 3200 N. Military Trail Suite, Apt #, etc. 27 Suite 200 City & State 28 BOCA RATON, FL Zip 29 33431
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4. FEI Number 65-0338928	Applied For 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
BARBIERI, FRANK A. JR
7000 W. PALMETTO PARK ROAD
STE 409
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	3200 N. Military Trail
83	Suite 200
84 City	BOCA RATON FL
85 Zip Code	33431

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: *Frank A. Jr. Barbieri* DATE: **1/17/97**

12. OFFICERS AND DIRECTORS		DELETE
TITLE	P	<input type="checkbox"/>
NAME	BARBIERI, FRANK A	
STREET ADDRESS	7000 W. PALMETTO PARK ROAD	
CITY - ST - ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGE	ADDITION
1.1 TITLE	Director	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	BARBIERI, FRANK A., Jr.		
1.3 STREET ADDRESS	3200 N. Military Trail, Suite 200		
1.4 CITY - ST - ZIP	Boca Raton, FL 33431		
2.1 TITLE	D, VP, T, S	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	SCRENCI, STEPHEN W.		
2.3 STREET ADDRESS	3200 N. Military Trail, Suite 200		
2.4 CITY - ST - ZIP	Boca Raton, FL 33431		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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: *Frank A. Jr. Barbieri* DATE: **1/17/97** (561) 997-5700

CR2E034 (9/96)