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

APPROVED AND FILED
-1 AM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # V52857 (2)

1. Corporation Name
CHF OF PINELLAS, INC.

Principal Place of Business	Mailing Address
5207 PARK BLVD 5572 PARK BLVD PINELLAS PARK FL 34665 US	5207 PARK BLVD 5572 PARK BLVD PINELLAS PARK FL 34665 US

3. Date Incorporated or Qualified: 07/15/1992
3a. Date of Last Report: 05/01/1994

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

4. FEI Number: 59-3138821 — 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

THOMPSON, DAVID A.
5335 66TH ST N
STE 4
ST PETERSBURG FL 33709

10. Name and Address of New Registered Agent

81 Name: HARVEY FRIEDMAN
82 Street Address (P.O. Box Number is Not Acceptable): 5572 PARK BLVD
83
84 City: PINELLAS PARK FL 85 Zip Code: 34665

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: HARVEY FRIEDMAN [signature] 5-1-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	FRIEDMAN, HARVEY
STREET ADDRESS	5572 PARK BLVD
CITY-ST-ZIP	PINELLAS PARK FL
TITLE	D
NAME	FRIENDMAN, CAROLYN
STREET ADDRESS	5572 PARK BLVD
CITY-ST-ZIP	PINELLAS PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP — Change / Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP — Change / Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP — Change / Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP — Change / Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP — Change / Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP — Change / Addition

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 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: HARVEY FRIEDMAN [signature] 5-1-95 813-546-0061
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0372800 CP