CORPORATION
ANNUAL REPORT 1989

1. Name and Address of Corporation Principal Office
   ZIP + 4
   017109 0
   THE CORPORATION COMPANY
   8751 WEST BROWARD BLVD
   PLANTATION, FL 33324-2630

2. Enter Change of Address of Corporation Principal Office, PO Box Number Alone is NOT Sufficient
   Street Address: 21
   PO Box No: 27
   City and State: 23
   Zip Code: 24

3. Date Incorporated or DC 02/04/1958
   To Do Business in Florida
   06/23/1925
   51-0099484
   Date of
   07/08/1988

4. Name and Address of Each Officer and Director as of December 31, 1988

   Title 1  Name  2  Office Address  3  (Do Not Use Post Office Box Numbers)
   4  City and State  5

   P/D  THORNE, OAKLEIGH  1209 ORANGE STREET  WILMINGTON, DE
   T  FINORA, JOSEPH J.  1209 ORANGE STREET  WILMINGTON, DE
   V/D  LOTORTO, LOUIS A.  1209 ORANGE STREET  WILMINGTON, DE
   S  KLIGANER, ELLEN  1209 ORANGE STREET  WILMINGTON, DE
   A/S  ALLEN, DONALD R.  8751 W BROWARD BLVD  PLANTATION, FL

5. Registered Agent Information

   1. Name and Address of Current Registered Agent
      C T CORPORATION SYSTEM
      8751 WEST BROWARD BLVD
      PLANTATION, FL 33324

   2. Date of Appointment
      FL

6. Pursuant to the provisions of Sections 607.034 and 607.037 Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits the statement for the purpose of changing its registered office or registered agent as set forth in the Corporate Records. Each of the officers and directors hereby authorized to make such changes have been supplied with a copy of this form.

   SIGNATURE
   (Registered Agent)
   DATE

7. If a foreign corporation, state where transacted business in Florida

8. If a foreign corporation, state where transacted business in Florida

9. If a foreign corporation, state where transacted business in Florida

10. You must sign the statement as an individual or officer of the corporation. A duly executed power of attorney must be submitted with the form.

11. You must sign the certificate of status as an individual or officer of the corporation. A duly executed power of attorney must be submitted with the form.

12. Should you desire a certificate of status check the box.

   CERTIFICATE OF STATUS DESIRED

13. Date:

   6/27/39

   Signature

   Joseph J. Finora

   Treasurer

   Telephone Number

   55 Additional Fee
   557575

   Certificate of Status