

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

4-24-96 B- (2) 4311 C

DOCUMENT # 286775
1. Corporation Name
EAST COAST SUPPLY CORP.



Principal Place of Business: 8801 N.W. 81 STREET ROAD, STE. 1 MIAMI FL 33166
Mailing Address: P.O. BOX 680707 MIAMI FL 33266-0707

3. Date Incorporated or Qualified: 11/06/1964
3a. Date of Last Report: 04/27/1995

2. Principal Place of Business: 21 8601 N.W. 81ST ROAD, 22 SUITE 1, 23 MIAMI FLORIDA, 24 33166
2a. Mailing Address: 26 P.O. BOX 680707, 27 MIAMI FLORIDA, 28 MIAMI FLORIDA, 29 33166, 30 MIAMI FLORIDA

4. FEI Number: 59-1087591
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$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: SINGER, RONALD, 2828 CORAL WAY, SUITE 480, MIAMI FL 33145

10. Name and Address of New Registered Agent: 81 Name: RONALD SINGER, 82 Street Address (P.O. Box Number is Not Acceptable): 8601 N.W. 81ST ROAD, 83 SUITE 1, 84 City: MIAMI, FL 85 Zip Code: 33166

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: RONALD SINGER, TREASURER, APRIL 19, 1996
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILBERMAN, LEWIS	1.2 NAME	
STREET ADDRESS	2828 CORAL WAY	1.3 STREET ADDRESS	8601 N.W. 81 ST ROAD SUITE 1
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI FLORIDA 33166
TITLE	ST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILBERMAN, EILEEN	2.2 NAME	
STREET ADDRESS	GROVE ISLE PH10	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARKE, SHIELA	3.2 NAME	
STREET ADDRESS	2828 CORAL WAY	3.3 STREET ADDRESS	8601 N.W. 81 ST ROAD SUITE 1
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI FLORIDA 33166
TITLE	V	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SINGER, RONALD	4.2 NAME	T
STREET ADDRESS	2828 CORAL WAY	4.3 STREET ADDRESS	8601 N.W. 81 ST ROAD SUITE 1
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FLORIDA 33166
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HASHAGEN, TIMOTHY	5.2 NAME	
STREET ADDRESS	5550 NW 12 AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCGEE, TED L	6.2 NAME	RICHARD SILBERMAN
STREET ADDRESS	2020 NORTH RIO GRANDE	6.3 STREET ADDRESS	8601 N.W. 81 ST ROAD SUITE 1
CITY-ST-ZIP	ORLANDO FL	6.4 CITY-ST-ZIP	MIAMI FLORIDA 33166

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: Ronald Singer, Ronald Singer, 4-19-96, 305 863 9711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)