SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) .PROFIT FLORIDA DEPARTMENT OF STATE *CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (9)602860 DRS. WEIL & SNYDER, P.A. Principal Place of Business Mailing Address 4410 SHERIDAN ST 4410 SHERIDAN ST HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 3a. Date of Last Report 03/28/1995 06/14/1971 2. Principal Place of Business 4. FEI Number Applied For Mailing Address 2a. 59-1350878 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 B. This corporation has liability for intangib<u>le tax under s. 199.032,</u> Country Country Zip Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCHWARTZ, JOSEPH L Street Address (P.O. Box Number is Not Acceptable) 3325 HOLLYWOOD BLVD **B2** HOLLYWOOD FL 83 Zip Code 84 City 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Ring stored Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1.1 TITLE TITLE CR2E034 1.2 NAME SNYDER, HERBERT A. NAME 4410 SHERIDAN ST. 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 14 CHY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE WEILMICHAEL J 2.2 NAME NAME 4410 SHERIDAN ST. 2 3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City - ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-7IP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 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), Fiorida Statutes 1 turther 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 deciver or trustee enipowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attantiment with an address 954-981-4896 Daylord Prince #

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE