

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Medeiros
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H65895** (5)

1. Corporation Name
YOUCHAK & YOUCHAK, INC.



Principal Place of Business
191 BRADLEY PLACE SUITE 3 PALM BEACH FL 33480 US

Mailing Address
191 BRADLEY PLACE SUITE 3 PALM BEACH FL 33480 US

2. Principal Place of Business
21 Sub: Apt #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Sub: Apt #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Organized **07/11/1985** 3a. Date of Last Report **04/13/1995**

4. FEIN Number **59-2567376** 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. 190.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**YOUCHAK, TOM M.
191 BRADLEY PALCE
PALM BEACH FL 33480**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Section 607.0105 and 607.1505, 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0105, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETED
NAME	YOUCHAK, THOMAS M.	
STREET ADDRESS	191 BRADLEY PALCE	
CITY, ST, ZIP	PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 'N '12

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I do hereby certify that the information supplied on this form is true and correct, and that I am an officer or director of the corporation, or the registered agent of the corporation, and that my name appears in Block 12 or Block 13 of this form.

SIGNATURE: *[Signature]* **THOMAS M YOUCHAK** 3/28/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)