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Mar 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J56486 (0)

1. Corporation Name
SPECIALTY MAUSOLEUMS, INC.



Principal Place of Business: 5201 NW 37TH AVE. TAMARAC FL 33309 US
Mailing Address: 5201 NW 37TH AVE. TAMARAC FL 33309-2487 US

3. Date Incorporated or Qualified: 02/09/1987
3a. Date of Last Report: 08/14/1996

2. Principal Place of Business: 21 Same as Above
2a. Mailing Address: 26 Same as Above

4. FEI Number: 65-0001470
Applied For: Not Applicable

22. Suite, Apt. #, etc.:
27. Suite, Apt. #, etc.:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. City & State:
28. City & State:

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24. Zip: 25. Country:
29. Zip: 30. Country:

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [X] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN, JERRY D.
5201 NW 37TH AVE.
TAMARAC FL 33309

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Randall K. Allen* DATE: 3/2/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: D/DV
NAME: ALLEN, RANDALL K.
STREET ADDRESS: 9150 NW 38TH DR., APT. 103
CITY-ST-ZIP: CORAL SPRINGS FL

11 TITLE: D/PRESIDENT (CHANGE TO)
12 NAME: RANDALL K. ALLEN
13 STREET ADDRESS: 9150 NW 38TH DR APT 103
14 CITY-ST-ZIP: CORAL SPRINGS, FL 33065

TITLE: D
NAME: ALLEN, JERRY D.
STREET ADDRESS: 5201 NW 37TH AVE.
CITY-ST-ZIP: TAMARAC FL
Retired

21 TITLE: D/PRES (RETIRED)
22 NAME: JERRY D. ALLEN
23 STREET ADDRESS: 5201 NW 37TH AVE
24 CITY-ST-ZIP: TAMARAC, FL 33309

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

31 TITLE: [] Change [] Addition
32 NAME:
33 STREET ADDRESS:
34 CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

41 TITLE: [] Change [] Addition
42 NAME:
43 STREET ADDRESS:
44 CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

51 TITLE: [] Change [] Addition
52 NAME:
53 STREET ADDRESS:
54 CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

61 TITLE: [] Change [] Addition
62 NAME:
63 STREET ADDRESS:
64 CITY-ST-ZIP:

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Jerry D. Allen* DATE: 3/2/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: JERRY D. ALLEN
Daytime Phone #: 954-731-2042

CR2E034 (9/96)