

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 Apr 01 1996 8:00 am
 Secretary of State

DOCUMENT # **M03421 (8)**

1. Corporation Name
FIRST CORPORATE ENTERPRISES, INC.



Principal Place of Business		Mailing Address	
ONE COMMERCIAL PLAZA ATTN: JOSEPH KORZENIK HARTFORD CT 06103 US		ONE COMMERCIAL PLAZA ATTN: JOSEPH KORZENIK HARTFORD CT 06103 US	
2. Principal Place of Business	2a. Mailing Address	21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State	23. Zip	28. Zip
24. Country	29. Country	25. Country	30. Country

3. Date Incorporated or Organized 07/31/1984	3a. Date of Last Report 04/03/1995
4. FEI Number 58-1578710	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing / Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ST LOUIS, ROLAND R JR
 FRIEDMAN, RODRIGUEZ, & FERRARO, P.A.
 201 S. BISCAYNE BLVD. 2300 MIAMI CENTER
 MIAMI FL 33131**

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 Sections 607.050(2) and 607.15(1), this corporation, the above named captioned individuals, the state agent for the purpose of changing its registered office or registered agent, or both, in the State of Florida, do hereby agree to pay the corporate filing fee and to pay the corporate filing fee and to pay the appointment as registered agent. I am familiar with, and accept the obligations of, the individual or individuals named above.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	CHASE, DAVID T.	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY, ST, ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CLARE, HAROLD	
STREET ADDRESS	ONE CORPORATE PLAZA	
CITY, ST, ZIP	FT LAUDERDALE FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	FREEDMAN, CHERYL C.	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY, ST, ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> DELETE
NAME	REMIREZ, RICHARD J. F.	
STREET ADDRESS	ONE CORPORATE PLAZA	
CITY, ST, ZIP	FT LAUDERDALE FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	CHASE, ARNOLD L.	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY, ST, ZIP	HARTFORD CT	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	

14. I do hereby certify that the information supplied to the Department is true, correct and does not conflict with the corporation's filing in Section 119.07(3)(k), Florida Statutes. I further certify that the information provided on this report is complete and does not conflict with any other information that I have the same legal effect as if made under oath. That I am an officer or director of the corporation, or the agent or authorized representative for registration as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: *Cheryl Chase Freedman*
 Cheryl Chase Freedman
 Exec. Vice President 3/20/96 (860) 549-1674
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)