

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

DOCUMENT # P93000020229 (9)

1. Corporation Name
1691, INC.



Principal Place of Business: 1691-A NORTHWEST 31ST AVENUE FORT LAUDERDALE FL 33311
Mailing Address: 1691-A NORTHWEST 31ST AVENUE FORT LAUDERDALE FL 33311

3. Date Incorporated or Qualified: 03/17/1993
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business: 21 3511 NE 22ND AVE, 22 3RD FLOOR, 23 FT LAUDERDALE FL, 24 32308
2a. Mailing Address: 26 3511 NE 22ND AVE, 27 3RD FLOOR, 28 FT LAUDERDALE, FL, 29 33308, 30

4. FEI Number: 65-0402415
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. 199.032 Florida Statutes: Yes

9. Name and Address of Current Registered Agent: ALBANESE, ARVID L, 1691 NW 31ST AVE, FT. LAUDERDALE FL 33311
10. Name and Address of New Registered Agent: 81 Name: ALBANESE, ARVID L, 82 Street Address: 3511 NE 22ND AVE, 83 3RD FLOOR, 84 City: FT LAUDERDALE, FL, 85 Zip Code: 33308

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, of 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: ARVID L. ALBANESE, 4-26-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	DELETE	1.1 TITLE: PD	Change Addition
NAME: ALBANESE, ARVID L		1.2 NAME: ALBANESE, ARVID L.	
STREET ADDRESS: 1691-A NORTHWEST 31ST AVENUE		1.3 STREET ADDRESS: 3511 NE 22ND AVE	
CITY-ST-ZIP: FORT LAUDERDALE FL		1.4 CITY-ST-ZIP: FT LAUDERDALE, FL 33308	
TITLE:	DELETE	2.1 TITLE:	Change Addition
NAME:		2.2 NAME:	
STREET ADDRESS:		2.3 STREET ADDRESS:	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP:	
TITLE:	DELETE	3.1 TITLE:	Change Addition
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE:	DELETE	4.1 TITLE:	Change Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
TITLE:	DELETE	5.1 TITLE:	Change Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE:	DELETE	6.1 TITLE:	Change Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 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), 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: X [Signature] 4-26-96 (954) 537-5544

CR2E034 (12/95)