

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

CORPORATION ANNUAL REPORT 1995

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



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 8:58

DOCUMENT # P94000025722 (7)
1. Corporation Name
11301 CORP.

Principal Place of Business: 20801 BISCAYNE BLVD. SUITE 304 NORTH MIAMI BEACH FL 33180
Mailing Address: 20001 BISCAYNE BLVD. SUITE 304 NORTH MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 320 N.W. 115th St.		2a 320 N.W. 115th St.		03/31/1994	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 MIAMI SHORES, FL		28 MIAMI SHORES, FL		59-0488172	Not Applicable
24 33168 USA		29 33168 USA		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				7. 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				10. Name and Address of New Registered Agent			
SASLAW, GARY R 20801 BISCAYNE BLVD. SUITE 304 NORTH MIAMI BEACH FL 33180				81 Name	JEROLD C. JORDON		
				82 Street Address (P.O. Box Number is Not Acceptable)	320 N.W. 115th Street		
				83			
				84 City	MIAMI SHORES	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 accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Jerold C. Jordan* JEROLD C. JORDON D/P/T/S 02-16-95
Regulator, holder of professional number of registered agent, and if applicable, FIDEL Registered Agent separate required when registering DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D/P/T/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SASLAW, GARY R	12 NAME	JEROLD C. JORDON
STREET ADDRESS	20801 BISCAYNE BLVD., SUITE 304	13 STREET ADDRESS	320 N.W. 115th Street
CITY - ST - ZIP	NORTH MIAMI BEACH FL 33180	14 CITY - ST - ZIP	MIAMI SHORES, FL 33168
TITLE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		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 193.07(3)(b), 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 attached with an address.

SIGNATURE: *Jerold C. Jordan* JEROLD C. JORDON 02-16-95 (305)754-3484
Regulator, holder of professional number of registered agent, and if applicable, FIDEL Registered Agent separate required when registering