

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra G. Mordam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 15 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000037033 (5)

1. Corporation Name
ARCHIVE AMERICA, INC.

Principal Place of Business Mailing Address
9350 SOUTH DIXIE HWY. SUITE 900 MIAMI FL 33156
9350 SOUTH DIXIE HWY. SUITE 900 MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/17/1994	3a. Date of Last Report
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	4. FEI Number	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
25. Suite, Apt. #, etc.	26. City & State	27. Zip	28. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. This corporation has liability for intangible tax under S. 193(1)(2), Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
29. Suite, Apt. #, etc.	30. City & State	31. Zip	32. Country		

9. Name and Address of Current Registered Agent PUCK, ROBERT J 9350 SOUTH DIXIE HWY. SUITE 900 MIAMI FL 33156				10. Name and Address of New Registered Agent			
B1. Name				B2. Street Address (P.O. Box Number is Not Acceptable)			
B3. City & State				B4. City			
				FL		B5. 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 _____
Signature Agent or certified name of registered agent, and title of agent Registered Agent (when registered agent resigns)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE	D	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANK, ANDREW	2. NAME	
STREET ADDRESS	9350 S. DIXIE HWY., STE. 900	3. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33156	4. CITY - ST - ZIP	
TITLE	D	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANK, TONY	22. NAME	
STREET ADDRESS	9350 S. DIXIE HWY., STE. 900	23. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33156	24. CITY - ST - ZIP	
TITLE	D	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUCK, ROBERT J	32. NAME	
STREET ADDRESS	9350 S. DIXIE HWY., STE. 900	33. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33156	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 law (has 1994/1995) 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 made under oath; that I am an officer or director of the corporation; and that my signature shall have the same legal effect as made under oath; that my name appears in Block 12 or Block 13 if changed or in an addition with an address.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/95