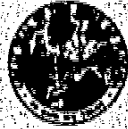


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.  
 AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, UNPAID AMOUNT DUE TO REINSTATE: \$175)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED  
 95 JUL 10 AM 10:06  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # P94000094130 (9)

1. Corporation Name  
 DOC'S CHICKS, INC.

Principal Place of Business Mailing Address  
 9 MARINA TER 9 MARINA TER  
 TREASURE ISLAND FL 33706 TREASURE ISLAND FL 33706

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/28/1984 3a. Date of Last Report  
 4. FEI Number 59-3284425 Applied For Not Applicable  
 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  No

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

9. Name and Address of Current Registered Agent  
 WILKINSON, G. BARRY  
 696 1ST AVE N  
 SUITE 201  
 ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent  
 81 Name Dennis L. Jones  
 82 Street Address (P.O. Box Number is Not Acceptable) 9 Marina Terrace  
 83  
 84 City Treasure Island FL 85 Zip Code 33706

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 Dennis L. Jones DATE 6-28-95  
 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
 TITLE D  
 NAME JONES, DENNIS L  
 STREET ADDRESS 9 MARINA TER  
 CITY - ST - ZIP TREASURE ISLAND FL 33706  
 TITLE D  
 NAME JONES, SUSAN D  
 STREET ADDRESS 9 MARINA TER  
 CITY - ST - ZIP TREASURE ISLAND FL 33706

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE D, P, T  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY - ST - ZIP  
 2.1 TITLE D, V, S  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY - ST - ZIP  
 3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY - ST - ZIP  
 4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY - ST - ZIP  
 5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP  
 6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Dennis L. Jones DATE 6-28-95 (813) 525-5500  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CP2E034 (3/95)