

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Jun 19 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000083811 (5)
1. Corporation Name
PROLONG SERVICES CORP.



Principal Place of Business 11355 SOUTHWEST 84TH ST MIAMI FL 33173	Mailing Address 11355 SOUTHWEST 84TH ST MIAMI FL 33173-3639
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/10/1996	3a. Date of Last Report MA
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0701550		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	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				10. Name and Address of New Registered Agent			
CORPCO, INC. 2699 SOUTH BAYSHORE DRIVE 7TH FLOOR MIAMI FL 33133				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	President	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	Jacob Shahan			1.2 NAME			
STREET ADDRESS	9101 SW 103 ST.			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33176			1.4 CITY-ST-ZIP			
TITLE	Vice-President	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	Larry Mankoff			2.2 NAME			
STREET ADDRESS	8900 SW 107 Ave Ste 201			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33173			2.4 CITY-ST-ZIP			
TITLE	Secretary	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	Helen Shaliam			3.2 NAME			
STREET ADDRESS	9101 SW 103 ST			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33176			3.4 CITY-ST-ZIP			
TITLE	Treasurer	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	Avi Bittan			4.2 NAME			
STREET ADDRESS	13503 SW 104 COURT			4.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33176			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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.

[Handwritten signatures and dates]

CR2E034 (9/96)