

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

CORPORATION ANNUAL REPORT 1995



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

APPROVED AND FILED

95 APR 21 PM 3: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V64235

(7)

1. Corporation Name A & S FARM CORP.

Principal Place of Business 1500 SAN REMO AVENUE SUITE 176 CORAL GABLES FL 33146 Mailing Address 1500 SAN REMO AVENUE SUITE 176 CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 09/14/1992 3a. Date of Last Report 02/09/1994 4. FEI Number 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. 189.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent ROTH, JEFFREY C. 1500 SAN REMO AVENUE SUITE 176 CORAL GABLES FL 33146

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS TITLE D NAME CHESLER, ALAN STREET ADDRESS 1500 SAN REMO AVENUE CITY - ST - ZIP CORAL GABLES FL TITLE D NAME CHESLER, SHERRY STREET ADDRESS 1500 SAN REMO AVENUE CITY - ST - ZIP CORAL GABLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE Change Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 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)(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 attachment with an address.

SIGNATURE: Sherry Chesler Sherry Chesler 3/13/95 305432-238 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Daytime Phone #