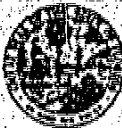


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortonham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 MAR 24 PM 1:35

DOCUMENT # 197799 (0)
 1. Corporation Name
LINEL CORP

Principal Place of Business C/O JEFFREY FINE 5200 BLUE LAGOON DR #200 MIAMI FL 33126	Mailing Address C/O JEFFREY FINE 5200 BLUE LAGOON DR #200 MIAMI FL 33126
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21 C/O Jeffrey Fine Suite, Apt. #, etc. 22 5200 Blue Lagoon Dr. #250 City & State 23 Miami, FL 33126 Zip Country 24 33126 25 USA		2a. Mailing Address 26 5200 Blue Lagoon Drive Suite, Apt. #, etc. 27 Suite 250 City & State 28 Miami, FL Zip Country 29 33126 30 USA		3. Date Incorporated or Qualified 11/23/1956	3a. Date of Last Report 02/15/1994
4. FEI Number 59-6064635		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					

9. Name and Address of Current Registered Agent FINE (JEFFREY) 5200 BLUE LAGOON DR SUITE 200 MIAMI FL 33126				10. Name and Address of New Registered Agent B1 Name Fine (Jeffrey) B2 Street Address (P.O. Box Number is Not Acceptable) 5200 Blue Lagoon Drive B3 Suite # 250 B4 City Miami, FL B5 Zip Code 33126			
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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 _____ (NOTE: Registered Agent signature required when nonstatutory) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	1.1 TITLE	☐ Change ☐ Addition
NAME	FINE, JEFFREY	1.2 NAME	
STREET ADDRESS	9010 SW 117TH ST	1.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI FL	1.4 CITY- ST- ZIP	
TITLE	SD	2.1 TITLE	☐ Change ☐ Addition
NAME	FINE, LINDA	2.2 NAME	
STREET ADDRESS	9010 SW 117TH ST	2.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI FL	2.4 CITY- ST- ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	BOOSTIN, HELEN	3.2 NAME	
STREET ADDRESS	1701 S FLAGLER DR	3.3 STREET ADDRESS	
CITY- ST- ZIP	W PALM BCH FL	3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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 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: _____
 (Signature must be typed on printed name of signing officer or director)
Jeffrey M. Fine, President

1-16-95 (305) 262-8489