

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT #
 1. Corporation Name

233465

HYDOT, INC.

Principal Place of Business
 89 Northeast 27th Street
 Miami, Florida 33137

Mailing Address
 SAME

3. Date Incorporated or Qualified
 02/19/1960

3a. Date of Last Report
 5/1/95

2. Principal Place of Business
 21 2875 NE. 191 St., #500
 Suite Apt # etc

2a. Mailing Address
 26 2875 NE. 191 St.
 Suite Apt # etc

4. FEIN Number
 59-0896324

App. Fee
 (1) Add. Fee

22 City & State
 23 Aventura, FL

27 City & State
 28 Aventura, FL

5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Election Campaign Fund and Trust Fund Contribution
 \$5.00 May Be Added to Fees

24 33180 25 USA

29 33180 30 USA

8. Is corporation authorized to conduct business in Florida?
 Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
 Hyman Katz
 89 Northeast 27th Street
 Miami, Florida 33137

81 Name
 Kerry Rosenthal, Esq.

82 Street Address (P.O. Box Number is Not Accepted)
 2875 Northeast 191 Street, Suite 500

83 Turnberry Plaza

84 City, State, and ZIP
 Aventura FL 33180

11. Signature of the person or persons authorized to file this report with the office of the Secretary of State...
 SIGNATURE: *Kerry Rosenthal*
 KERRY ROSENTHAL, ESQ., R.A.

8/7/96

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS
TITLE: PRESIDENT/DIRECTOR	TITLE:
NAME: HYMAN KATZ	NAME:
STREET ADDRESS: 1000 Island Boulevard #403	STREET ADDRESS:
CITY, STATE, ZIP: Williams Island, Florida, 33160	CITY, STATE, ZIP:
TITLE: SECRETARY/DIRECTOR	TITLE:
NAME: DOROTHY KATZ	NAME:
STREET ADDRESS: 1000 Island Boulevard #403	STREET ADDRESS:
CITY, STATE, ZIP: Williams Island, Florida, 33160	CITY, STATE, ZIP:
TITLE:	TITLE:
NAME:	NAME:
STREET ADDRESS:	STREET ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:
TITLE:	TITLE:
NAME:	NAME:
STREET ADDRESS:	STREET ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:

2875 NE. 191 St., #500
 AVENTURA, FL 33180

2875 NE. 191 St., #500
 AVENTURA, FL 33180

800001922868
 -08/15/96--01015--027
 ***225.00

SIGNATURE: *Hyman Katz* (HYMAN KATZ)

7/19/96 305-932-3020

CR2E034 (3-96)

8/15/96