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.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (8)DOCUMENT # 525645 FFAINC. Principal Place of Business Mailing Address 11446 WALSINGHAM RD. 11446 WALSINGHAM RD. LARGO FL 34648 **LARGO FL 34648** 3a. Date of Last Report 3. Date Incorporated or Qualified 02/11/1977 05/01/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-1723716 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible (ax under s. 199.032 Zip Country Country Zip Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PETERS, BLAINE L. 11446 WALSINGHAM RD. Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34648** 83 Zip Code 85 R4 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or priched runse of registered agent and to est apply able (NOTE: Registered Agent's gradure required when remaining) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)OFFICERS AND DIRECTORS 13. 12. DELETE 111111 TiTLE CR2E034 1.2 NAMÉ PETERS, BLAINE L. NAME 1.3 STREET ADDRESS 11446 WALSINGHAM RD. STREET ADDRESS 14 CITY ST-ZIP LARGO FL CITY-ST-ZIP Change Addition DELETE 21 fiftE TITLE STV 2.2 NAME PETERS, BLAINE L. 11446 WALSINGHAM ROAD 2.3 STREET ADDRESS STREET ADDRESS 2 4 CHY - ST - ZIP LARGO FL DITY-ST-ZIP Change Addition DELETE 3.1 DILE TITLE 3.2 NAME

NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CIFY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5.1 1000 TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE NAME 6.3 STREET ADORESS STREET ADDRESS 64 CiTY - ST - ZIP CHTY - 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 of supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an only er or director of the cost cration or the rediver or trustee empowered to execute this region as required by Chapter 617. Florida Statutes, and that my name appears in Block 24 or Block 13 if changed for on an attachment with an address.

SIGNATURE:

JUME TELEVATOR OF SIGNING OFFICER OF DIRECTOR

813-391-0300