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Jan 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 546858 (2)

1. Corporation Name
F P C, INC.



Principal Place of Business: 7851 S.W. 6TH ST., SUITE 308 PLANTATION FL 33324
Mailing Address: 7851 S.W. 6TH ST., SUITE 308 PLANTATION FL 33324-3211

3. Date Incorporated or Qualified: 08/25/1977
3a. Date of Last Report: 04/16/1996

2. Principal Place of Business: 21 2200 CORPORATE BLVD N.W.
2a. Mailing Address: 26 2200 CORPORATE BLVD N.W.

4. FEI Number: 59-1764397
Applied For: Not Applicable

Suite, Apt. #, etc.: 22 SUITE 210
27 SUITE 210

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

City & State: 23 BOCA RATON, FLORIDA
28 BOCA RATON, FLORIDA

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

Zip: 24 33431
Country: 25 USA
29 33431
30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
SCHWARTZ, NEIL D
7851 S.W. 6TH STREET, SUITE 308
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name: SCHWARTZ, NEIL D.
82 Street Address (P.O. Box Number is Not Acceptable): 2200 CORPORATE BLVD, N.W., SUITE 210
83
84 City: BOCA RATON FL 85 Zip Code: 33431

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: Neil D. Schwartz, Pres. NEIL D. SCHWARTZ, PRES 1/7/97
NOTE: Registered Agent signature required when reinstating.

Table with 6 rows and 2 columns for Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and a Delete checkbox.

Table with 6 rows and 2 columns for Additions/Changes to Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition.

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.

SIGNATURE: NEIL D. SCHWARTZ, PRES. Neil D. Schwartz, Pres 1/7/97 (561) 912-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)