FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNITAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

		1997	JHI			DIVISION OF CO				Secretary of State				
1.	OCUI Corporation Q-MAST	MENT Name ERS, INC		561604	1	(0)								
Principal Place of Business 2699 S UNIVERSITY DRIVE DAVIE FL 33328					20	Mailing Address 2699 & UNIVERSITY DRIVE DAVIE FL 33328-1437				A ABBOON ANNO BALAY ARANG ANNA ABUNJ BUBI				
											Date Incorporated or Qualified 03/09/1978	1	e of Last R 1/1996	eport
2. 21	Principal Pl	lace of Busin	1088		2a.	Mailing Address				4.	FEI Number 59-1821704			plied For t Applicable
1	Suite, Apt	#, etc				Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75	Additional
22	City & State	9			27	City & State				6.	Election Campaign Financing		\$5.00	May Be
23	Ζιρ			Country	28	Zip	Cour	ntry		8.	Trust Fund Contribution This corporation has liability for i			
24	1	9 Name	25	Address of Curre	29 ni Regis	tered Agent	30			10	Florida Statutes Name and Address of New Re	Yes		
YONGE, JAMES E. 1256 SEMINOLE DRIVE FT.LAUDERDALE FL 33304								81 82 83		ess (F	P.O. Box Number is Not Acceptab	le)		
								84 City				FL	65 Zip	Code
1	SIGNATURE			of Sections 607.050 or both, in the State of accept the oblig					-named corporation the corporation the corporation the corporation that		on submits this statement for the p board of directors. I hereby accep on reinstaling)	urpose of a	changing it intment as	s registered registered
1	2.			OFFICERS AN	ID DIRE		13.				ADDITIONS/CHANGES TO OFFIC			
N.	ite Ame Treet adoress Ity-st-249	STD YONGE, 1256 SE FT LAUD	MINC			DELETE	1.1 T(T) 1.2 NAN 1.3 STF 1.4 C(T)	ME REET	ADDRESS 1-7IP			l	Change	Addition
-	illE	PD			*	DELETE	2.1 TIT				······································		Change	Addition
S	YONGE, JAMES E. 1256 SEMINOLE DRIVE TITLE LAUDERDALE FL						2.3 STF	2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP						:
N S	itle Ame Ireet address					DELETE		ME REE1	Adoress				Change	Addition
T)	ITY-ST-ZIP TLE AME TREET AOORESS					DELETE	3.4. C(1 4.1 T(1) 4.2 NA	LE	ADDRESS	<u></u>			Change	Addition
C!	HTY+ST-ZIP ICLE AME	i				DELETE	4.4 CIT 5.1 TITI 5.2 NAI	Y-S' LE					Change	Addition
S	TREET ADDRESS ITY-ST-ZIP	······································				DELETE		REET Y-S	ADORESS T-ZIP				Change	Addition
N.	AME TREET ADDRESS HTV+ST+ZIP						6.2 NAI	ME Reet	ADDRESS T-ZIP			•		

14. I do horeby 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:

FILED

Apr 15 1997 8:00am