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.) PROFIL FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (5)650551 FIRST CAPITAL MANAGEMENT CORPORATION Principal Place of Business Mailing Address 101 WATERVIEW DRIVE 101 WATERVIEW DRIVE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 3a. Date of Last Report 3. Date Incorporated or Qualified 07/07/1995 01/09/1980 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-1955576 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #. etc. Suite, Apt. # etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 This corporation has liability for intangible tax under s. 199 032 Zip Country Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CALUWE, CAROL A Street Address (P.O. Box Number is Not Acceptable) 82 101 WATERVIEW DRIVE PALM BEACH GARDENS FL 33418 83 Zip Code 84 85 City FL 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. (NoTE: Re. ) stored Apoint sopilative required when resistation Segment type the part or area or may be adapted and short applicable (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELÉTE Change: Addition 1 1 TITLE TITLE CR2E034 CALUWE, CAROL A. 1.2 NAME NAME 101 WATERVIEW DRIVE 1.3 STREET ADORESS STREET ADDRESS PALM BEACH GARDENS FL 1.4 CiTY - ST - ZIP CITY - ST - ZIP Charige Addition DELETE 2.1 1IfEF TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST- ZIP DELETE Change Addition 3.1 11/11 TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4 CHY-S1-ZIP CITY-ST-ZiP Change Addition DELETE 4.1 IIII.E TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CIFY - ST - ZIP CHTY-ST-ZIP Change Addition DELETE 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CiTY - ST - Zift CITY - ST - ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not outlify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 further certify that the information indicated on this annual report or supplicated annual report is true and accurate and that my signature shall have the same legal effect as it 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 617, Florida Statutes and that my name appears in Block 12 or Block 13 if chapped, or on an attachment with an address.

SIGNATURE:

561-622-6385