SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON DR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 97 SEP 15 AM 9: 50 DIVISION OF COPPORATIONS 1997 SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # 'F07909 (7) WORTH, INCORPORATED Principal Place of Business Mailing Address 11518 VICTORIA DRIVE C/O STANLEY WORTH 11518 VICTORIA DRIVE 11518 VICTORIA DRIVE DO NOT WRITE IN THIS SPACE **BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/04/1980 01/30/1996 2a. Mailing Address Applied For 2. Principal Place of Business (518 Victoria .04-1733090 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes Yes 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WORTH, STANLEY 11518 VICTORIA DRIVE 82 Street BOYNTON BEACH FL 33437 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation's board of directors. I heroby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed minus of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 THUS WORTH, STANLEY NAME 1.2 NAME 300002297043--5 11518 VICTORIA DRIVE STREET ADDRESS 1.3 STREET ADDRESS -09/18/97--01074--025 **BOYNTON BEACH FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP ****165.00 _ *****165, QQion DELETE 2.1 TITLE TITLE WORTH, MARILYN J. NAME 2.2 NAME 11518 VICTORIA DRIVE STREET ADDRESS 2.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST 7P 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Addition 41 TITLE TITLE NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(TY - S1 - Z(P CITY-ST-ZIP TITLE DELETE 5.1 TITL€ Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-\$1 - ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 of I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed or on an attachment with an address.

661.727.51100