SANDS & MOSKOWITZ

PROFESSIONAL ASSOCIATION

SUITE 300

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3225 AVIATION AVENUE

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JAY R. MOSKOWITZ LEONARD A. SANDS

TELEPHONE DADE (305) 265-1500 FAX (305) 285-0899

March 4, 1997



CERTIFIED MAIL RETURN RECEIPT # P 040 583 892

Secretary of State of the State of Florida **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

DIVISION OF CORPORATIONS

RE: REQUEST FOR VOLUNTARY DISSOLUTION OF ABRAHAM FREI, INC.

CORPORATION CERTIFICATE NO. F27767

FEDERAL EMPLOYER IDENTIFICATION NUMBER 59-2089661

Gentlemen:

I represent ZIPORA FREI the widow and the sole shareholder of ABRAHAM FREI, INC. At this time, Mrs. FREI would like to voluntary dissolve

corporation. Attached please find a corporate resolution attesting to that fact signed by Mrs. FREI. In addition, enclosed please find a self addressed stamped envelope

to facilitate the return of the "clocked in" corporate resolution dissolving the corporation.

900002140629---4 -04/11/97--01086--008 *****35.00 *****35.00

ÖNARD A. SANDS, ESQUIRE



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 10, 1997

Leonard A. Sands, Esq. 3225 Aviation Ave. Suite 300 Coconut Grove, FL 33133

SUBJECT: ABRAHAM FREI, INC. Ref. Number: F27767

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The document must state the date the dissolution was authorized.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. For each certified copy requested, please add an additional \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6908.

Steven Harris Corporate Specialist

Letter Number: 597A00011996

LAW OFFICES

SANDS & MOSKOWITZ

PROFESSIONAL ASSOCIATION

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COCONUT GROVE, FLORIDA 33133

JAY R. MOSKOWITZ LEONARD A. SANDS TELEPHONE DADE (305) 285-1500 FAX (305) 285-0699

March 25, 1997

CERTIFIED MAIL
RETURN RECEIPT # P 040 583 894

Secretary of State of the State of Florida Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Attention: Steven Harris, Corporate Specialist

RE: REQUEST FOR VOLUNTARY DISSOLUTION OF ABRAHAM FREI, INC. CORPORATION CERTIFICATE NO. F27767 FEDERAL EMPLOYER IDENTIFICATION NUMBER 59-2089661

LETTER NUMBER: 597A00011996

Mr. Harris:

I represent ZIPORA FREI the widow and the sole shareholder of ABRAHAM FREI, INC. At this time, Mrs. FREI would like to voluntary dissolve the corporation.

Attached please find a revised corporate resolution attesting to that fact signed by Mrs. FREI. We have edited the document to include the date of authorization. In addition, enclosed please find a self addressed stamped envelope to facilitate the return of the "clocked in" corporate resolution.

Sincerely yours.

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Division of Corporations March 1997 Page - 2 -

REQUEST FOR VOLUNTARY DISSOLUTION OF ABRAHAM FREI, INC. CORPORATION CERTIFICATE NO. F27767 FEDERAL EMPLOYER IDENTIFICATION NUMBER 59-2089661

CORPORATE RESOLUTION

ZIPORA FREI, the widow of ABRAHAM FREI --who died on August 15, 1993-- now being the sole stock holder and owner of Abraham Frei, Inc., hereby voluntarily dissolves and closes the said corporation, effective this 25th day of March. This dissolution was authorized this 25th day of March.

3.25.97 DATE

STATE OF FLORIDA

COUNTY OF DADE

BE IT KNOWN, that on the 25th day of March, 1997, befor appeared the above named, Zipora Frei, who is personally known to me and in addition displayed to me identification consisting of Florida driver's license no. F600-980-41-607, and, who signed the foregoing in my presence acknowledging the same to be her free act and deed.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my seal of office this 25th day of March, 1997.

Notary Public, State of Florida

Jacqueline Poli

SANDS & MOSKOWITZ, P.A.