

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.)

PROFIT
 CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # F93000000028 (1)
 1. Corporation Name

MERCURY TECHNOLOGIES CORPORATION



Principal Place of Business Mailing Address
C/O PATRICK J. PERKINS, M.D.
3 DE SOTO COURT
ORINDA CA 94563

3. Date Incorporated or Qualified **01/05/1993** 3a. Date of Last Report **04/26/1995**
 4. FEI Number **94-3030631** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip 28 Zip Country 29 Country 30

9. Name and Address of Current Registered Agent
 • **ADVANCED ENVIRONMENTAL RECYCLING CORP. OF FLORIDA**
 • **4317 L FORTUNE PLACE**
 • **WEST MELBOURNE FL 32934**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ (NAME Registered Agent Signature required when reinstated) (DATE)

12. OFFICERS AND DIRECTORS
 TITLE NAME STREET ADDRESS CITY-ST-ZIP
 1. **PSTD PERKINS, PATRICK J** 3 DE SOTO COURT ORINDA CA 94563
 2. **D KANTER, IRA E** 287 PASEO BERNAL MORAGA CA 94556
 3. **D MORRIS, LEWENSTEIN** 3029 RIVERA DR. BURLINGAME CA 94010
 4. **D NOBLE, MICHAEL T** 238 TERN PLACE DAVIS CA 95616

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included in 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or both, or on an attachment with an address.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)