

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION:
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -8 PM 2:54

DOCUMENT # F93000002057 (8)

1. Corporation Name

EASTWIND CAPITAL CORP.

Principal Place of Business

10146 US HWY 19
PORT RICHEY FL 34668

Mailing Address

C/O O'DONNELL & PHUFAS
1790 BROADWAY 17TH FLOOR
NEW YORK NY 10019

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 170 O'DONNELL + PHUFAS

27 1700 BROADWAY SUITE 1700

28 NEW YORK, N.Y.

29 10019

30 Country

3. Date Incorporated or Qualified

04/30/1993

3a. Date of Last Report

02/07/1994

4. FEI Number

13-3534083

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

9. Name and Address of Current Registered Agent

TOTOLOS, DENISE
10146 U.S. HIGHWAY 19
PORT RICHEY FL 34668

10. Name and Address of New Registered Agent

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

10128 A U.S. HIGHWAY 19

83

Same

84 City

Same

FL

85 Zip Code
Same

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

Denise Totolos

3/1/95

12. OFFICERS AND DIRECTORS

11 TITLE PD
12 NAME O'DONNELL, JOHN P
13 STREET ADDRESS 1790 BROADWAY, (17TH FLOOR)
14 CITY - ST - ZIP NEW YORK NY 10019

21 TITLE VDS
22 NAME PHUFAS, JOHN M
23 STREET ADDRESS 1790 BROADWAY, (17TH FLOOR)
24 CITY - ST - ZIP NEW YORK NY 10019

31 TITLE VD
32 NAME VOUTSINAS, SPIROS J.
33 STREET ADDRESS 2425 SURF DRIVE
34 CITY - ST - ZIP BELLMORE, N.Y. 11710

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PD Change Addition
12 NAME O'DONNELL, JOHN P
13 STREET ADDRESS 1790 BROADWAY, SUITE 1700
14 CITY - ST - ZIP NEW YORK, N.Y. 10019

21 TITLE VDS Change Addition
22 NAME PHUFAS, JOHN M.
23 STREET ADDRESS 1790 BROADWAY, SUITE 1700
24 CITY - ST - ZIP NEW YORK, N.Y. 10019

31 TITLE VD Change Addition
32 NAME VOUTSINAS, SPIROS J.
33 STREET ADDRESS 2425 SURF DRIVE
34 CITY - ST - ZIP BELLMORE, N.Y. 11710

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(6)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report in fees and accounts and that my signature shall have the same legal effect and shall conclusively state 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 on Block 12 or Block 13 of this report, or on an attachment with my address.

SIGNATURE:

John P. O'Donnell
JOHN P. O'DONNELL

Pres. 1/17/95 212 245 7500