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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	F9400003980	(9)
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R.W. DURHAM & COMPANY

Pencipal Place	of Business	Mailing Address			4 INDIIAN HIE ININ DINII GANI BANI	# QQIM QQIIL 88100 11#10 19101 18111 Q811 1881
STE 355	21515 HAWTHORNE BLVD 21515 HAWTHORNE BLVD STE 355 STE 355 TORRANCE CA 90603 TORRANCE CA 90603					
US		US			3. Date Incorporated or Qualified 08/01/1994	3a. Date of Last Report 02/01/1995
Princ-pat Pi 	lace of Business	2a. Mailing Address	3		4. FEI Number 95-3364660	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	c.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 <i>Z</i> ip	Country	[28] Zip	Country		8. This corporation has liability for in	ntanoible tax under s 199.032.
24	25	29	30		Fiorida Statutes Yes	
	9. Name and Address of Co	urrent Registered Agent			10. Name and Address of New R	egistered Agent
			81	Name		
	Orporate Services, Inc. Park ave.		82	Street Addr	ess (P.O. Box Number is Not Acceptabl	le)
SUITE	200		83			,
TALLA	HASSEE FL 32301		84	City		FL 85 Zip Code
or registe	to the provisions of Sections 607, red agent, or both, in the State of ith, and accept the obligations of,	f Florida. Such change was au	thorized by the corpo	amed corpor oration's boar	ation submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing its registered office
SIGNATURE	*				,,	
	Signature, type or protect name of registers: OFFICE RS	d agent and the frappicable. SIAND DIRECTORS	(NOTE: Registered Agont	t signature require	ADDITIONS/CHANGES TO OFFI	DATE ICERS AND DIRECTORS IN 12
TILE .	PDC	DELETE		T	7,557101101011110201101111	Change Addition
NAME	DURHAM, RALPH W		1.2 NAME			
STREET ADDRESS	2800 PASEO DEL MAR		13 STREET	ADDRESS		
CITY - S' - ZIP	PALOS VERDES ESTAT		1.4 CITY - S	T - ZIP		
11°LF		Delete				Change Addition
NAME			2 2 NAME			,
51REFT ACORERS			2 3 STREET			1
COTY ST-ZOP		[] DELETI	2 4 CITY - S 3 1 TITLE	I - ZIP		Change Addition
NAME		[_] beech	3 2 NAME		•	C. Outside C. Massion
SUPELL ADURESS			33 STREET	ADORESS		
CiTY+ST-ZIP			3 4 CITY - S	1		
101. F		☐ DELETI				☐ Change ☐ Addition
NAME			4.2 NAMÉ			
STREET ACCRESS			43 STREET	ADDRESS		
011Y - \$1 - ZIP			4 4 CiTY-S	T-21P		
MILE		DELETI	DELETE 5 1 TITLE			☐ Change ☐ Addition
MM:			5 2 NAME	-		
STREET ADDRESS			53 STREET	ADDRESS		
CON ST ZO	<u></u>		54 CITY-S	1 - 7IP		
TILF		DELETI	6 1 TITLE			Change Addition
NAMI			6.2 NAME			
STHEET ACIDRESS			63 STREET	ADDRESS		
CITY - ST - ZIP		- <u>.</u>	64 CITY - S			
14. Ldo herel	by codify that the information sun-	olied with this filion is voluntari	ly furnished and does	s not nualify f	for the exemption stated in Section 119.	07/3\/k\ Florida Statutes I further

4. Lot hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(8), Florida Statutes. Flurther 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 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 607, Florida Statutes; and that my name appears in Bluck 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

126-96 (310)540-1800