SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 18 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS F96000001708 (4) DOCUMENT # FW INTERNATIONAL, INC. Principal Place of Business Mailing Address 4001 NORTH OCEAN BOULEVARD 4001 NORTH OCEAN BOULEVARD **BOCA RATON FL 33431 BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 04/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 4400 N. Federal Highung N. Federal 4400 04-2212892 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suik Suite Z10 Fee Regulred 210 City & State City & State \$5.00 May Be 6. Election Campaign Financing CATON. BOCA BURA FI Trust Fund Contribution П Added to Fees 2_D Country 8. This corporation owes or has paid the current year Intangible 33Y3 3343/ 24 Personal Property Tax due June 30. X Yes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name abrams, gerald a **4001 NORTH OCEAN BOULEVARD** 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City 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, a both, in the Statute Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, the accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required whom reinstating) stered agent and their applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE 1.1 TITLE ABRAMS, GERALD A NAME 1.2 NAME 4001 NORTH OCEAN BOULEVARD STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 1.4 CITY-\$1-ZIP DELETE Change Addition TITLE 2.1 TITLE YORKS, MIRIAM NAME 2.2 NAME 7 MAGNOLIA STREET STREET ADDRESS 2.3 STREET ADDRESS FRAMINGHAM MA CITY-ST-ZIP 2 4 CHY-ST-ZIP Addition DELETE Change 31 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP TITLE DELETE 4.1 1111.8 Change ■ Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Addition TITLE 5.1 TILLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELFTE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

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 supplient had 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 Block 12 or Block 13 in chapter 607, and that my name appears in Block 12 or Block 13 in chapter 607.

6.3 STREET ADDRESS

6.4 CHY-ST-ZIP

STREET ADORESS

CITY-ST-ZIP