

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000002116 (9)

1. Corporation Name

BOCA GROUP INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

ATTN: LEE POLLACK  
POLLACK & MCGUIRE, 925 WESTCHESTER AVE  
WHITE PLAINS NY 10604

ATTN: LEE POLLACK  
POLLACK & MCGUIRE, 925 WESTCHESTER AVE  
WHITE PLAINS NY 10604

3. Date Incorporated or Qualified

04/26/1996

3a. Date of Last Report

Initial

2. Principal Place of Business

21 11 Penn Plaza

2a. Mailing Address

26 11 Penn Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 NYC NYS

City & State

28 NYC NYC

Zip

24 10001

Country

25 U.S.A.

Zip

29 10001

Country

30 USA

4. FEI Number

13-3881288

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

NICHUALS, JOHN  
1236 MALONE AVE  
SPRING HILL FL 34606

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

Signature or typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DCPT	NICHUALS, DANIEL	504 WYNNEWOOD RD	PELHAM MANOR NY 10803	<input type="checkbox"/>
DCVS	WERNON, RICHARD	360 1ST AVE	NEW YORK NY 10010	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

DANIEL NICHUALS

4/25/97

212  
368-5258

Date

Daytime Phone #

CR2E034 (9/96)