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.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # G37300 RYAN & UCHIN, INC. Principal Place of Business . Mailing Address % WILLIAM GRADY RYAN % WILLIAM GRADY RYAN 1144 SE 3RD AVENUE 1144 SE 3RD AVENUE FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316 3a. Date of Last Report 3. Date Incorporated or Qualified 05/06/1983 05/01/1995 2. Principal Place of Business 2a. Mailing Address FE I Number Applied For 59-2349416 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite. Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28

RYAN, WILLIAM GRADY 1144 SE 3RD AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 FT. LAUDERDALE FL 33316 83 84 85 Zip Code City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes.

Country

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14. I do hereby certify that the information supplied with this fing 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 indicated on this annual report or supplemental annual report is true and accurate and that his signature shall have the same legal effect as if made under oath, that I are 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 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST. ZIP

NAME

STREET ADDRESS

CITY - ST - ZIP

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SIGNATURE

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Country

9. Name and Address of Current Registered Agent

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SIGNATURE AND TYPED OR PRINTED NAME OF

The Mean

8. This corporation has liability for inlangible tax under s. 199 032,

10. Name and Address of New Registered Agent

Florida Statutes

[] Yes [] No