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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

H58677

(6)

FOR SALE INC

10110	ALL, INO									
Principal Place	of Business	Mailing Addr	ess					** 1881 81811 814	***********	., ., ., ., ., ., ., .,
5309 NE 3RI FT LAUDERI) AVE Dale fl 33334		R COURT LE CA 94086	 						
US							3. Date Incorporated or Qualified 05/17/1985	17/1985 05/01/1995		
2. Principal Pla	ce of Business	2a. Mailing A	.ddress		_		4. FEI Number	·		Applied For
21		26					65-0290514			Not Applicable
Suite, Apt. #	, etc.	Suite, Ap	ot. #, etc.				5. Certificate of Status Desired	Ø		5 Additional Required
City & State		City & St	ate				6. Election Campaign Financing Trust Fund Contribution			00 May Be ad to Fees
23 <i>Z</i> ip	Country	Zip		Cou	ntry		8. This corporation has liability for	intangible ta	x under s	199.032,
24	25	29		30		 	Florida Statutes		Agent	
	9. Name and Address of Curr	ent Registered Ag	ent		81	Name	IV. MAUIE BIIO MODIOSS OI MON I	.ugiatoreu i	-5	
LIEDNA	NDEZ, GEORGINA C.				82		dress (P.O. Box Number is Not Acceptal	ble)		
5309 N	Ortheast 3RD Avenue					Stiest Add	11655 (1.O. DOX NUMBER TO THE THOUSE			
FT. LAI	JDERDALE FL 33334				83					
					84	City		FL	85 Z	Zip Code
		60 - 1 602 1500 F	Invide Ctet de	s the abo	L]	amed corre	pration submits this statement for the pu	ironse of cha	anging its	registered office
familiar Wit	th, and accept the obligations of, se Signature, typed or printed name of registered as	ection 607,0005, Fig ent and title if applicable.	riua Statutes	TE Registered			and of directors. Thereby accept the apparent of directors and of directors. Thereby accept the apparent of directors and directors. ADDITIONS/CHANGES TO OF	DATE		
12.		AND DIRECTORS	DOLLAR	13.			ADDITIONS/CHANGES TO OF		Change	
TITLE	PD	L] DELETE	1.17				,		—
NAME	KASKA, GEORGINA C.			1.2 N		ADDRESS				
STHEET ADDRESS	931 ASTER COURT	740								
CITY-S1-7IP	SUNNYVALE CA 94086-67		DELETE	2 11		IT-ZIP			Change	Addition
TITLE	KASKA, GEORGINA C.		,	2.2 N						
NAME CAUCAL ADODUCE	931 ASTER COURT					ADDRESS				
STREET ADDRESS	SUNNYVALE CA 94086-6	740		240	HTY-S	ST-ZIP				
CITY - ST - ZIP) DELETE	3.1	TITLE				Change	e 🔲 Addition
NAMī				321	IAME					
STREET ADDRESS				3.3.	STREE	T ADDRESS				
CITY-S1-ZIP				340	HTY-S	ST - ZIP			F 3 0b	e
THLE] DELETE	4.1	TITLE				Change	2 [_] Addition
NAM:				1	IAME					
STREET ADDRESS				4.3 3	STREE	I ADDRESS				
CITY - S1 - ZIP						SI - ZIP			Chang	e Addition
TITLE			DELETE		TITLE	i				. LI NOSEON
NAME					NAME					
STREET ADDRESS				- 1		1 ADDRESS				
City-St-ZiP			T DOLLAR			S1-ZIP			□ Chang	e [] Addition
THILE			DELETE		TITLE				— _{2,101,1} д	
NAME					NAME					
STREET ADDRESS						T ADDRESS				-
CHY-ST-ZiP				6.4	CITY-	ST-ZIP	I have stated in Cratica 41	0 07(2)(L) E	lorida Sta	tutes Uturther

14. I do hereby certify that the information supplied with this filing 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 my signature shall have the same legal effect as if made under certify 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: Service C. Sake (GEORGINA C. KASKA) 4/28/96 (408) 773-1642