

FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

FILED

Mar 27 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J56993** (5)  
1. Corporation Name  
**CIRO INDUSTRIES, INC.**



Principal Place of Business <b>721 NW 7TH TERRACE FT LAUDERDALE FL 33311-7312</b>	Mailing Address <b>721 NW 7TH TERRACE FT LAUDERDALE FL 33311-7312</b>
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3. Date Incorporated or Qualified <b>02/05/1987</b>	3a. Date of Last Report <b>03/06/1996</b>
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21. Principal Place of Business Suite, Apt. #, etc. 22. City & State 23. Zip Country	2a. Mailing Address Suite, Apt. #, etc. 27. City & State 28. Zip Country
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4. FEI Number <b>06-1190853</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**SECKEL, WILLIAM B  
705 NE 2ND STREET  
APT. 4  
HALLANDALE FL 33009**

10. Name and Address of New Registered Agent

81 Name <b>SECKEL WILLIAM B.</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>3326 N.E. 16TH PL.</b>	
83	
84 City <b>FT. LAUDERDALE</b>	85 Zip Code <b>FL 33305</b>

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 *William B. Seckel*  
Signature, typed or printed name of registered agent and title if applicable

DATE

12. OFFICERS AND DIRECTORS		DELETED
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>SECKEL, WILLIAM</b>	
STREET ADDRESS	<b>705 NE 2ND STREET, #4</b>	
CITY-ST-ZIP	<b>HALLANDALE FL</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>SECKEL, JAMES</b>	
STREET ADDRESS	<b>705 NE 2ND STREET, #4</b>	
CITY-ST-ZIP	<b>HALLANDALE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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: *William B. Seckel*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **3-21-97**  
Daytime Phone #: **954-767-6825**

CR2E034 (9/96)