

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheny
Secretary of State
1900 BANK CENTER PLAZA, 12TH FL.
TALLAHASSEE, FLORIDA 32399-0001

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

95 MAY -1 PM 1:57

DOCUMENT # **J60424** (5)

LIJEN PRODUCTS CORP.

1. Principal Office Location 4153 SW 47TH AVE SUITE 130 FT LAUDERDALE FL 33314		2a. Mailing Address 4153 SW 47TH AVE SUITE 130 FT LAUDERDALE FL 33314		3. Date of Incorporation 03/02/1987		3a. Date of Last Report 02/10/1994	
2. Filing Office of Registrar 21	2a. Mailing Address 26		4. FII Number 59-2796233		Applied Fee Not Applicable		
22. State of Incorporation FL		27. State of Report FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
23. City of Report FT LAUDERDALE		28. City of State FT LAUDERDALE		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24. Filing Office 25		29. Filing Office 30		8. This corporation has liability for unpaid or late reports to the Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent POLLOCK, STEVEN 1861 NW 107 TERR PLANTATION FL 33322				10. Name and Address of New Registered Agent			
				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City			
				B5 Zip Code FL			

11. Pursuant to the provisions of Sections 607 (04) and (05) and 607 (09) 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 (09)(5), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
OFFICER	PT POLLOCK, STEVEN 1861 NW 107 TERR PLANTATION FL	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VS POLLOCK, SUSAN 1861 NW 107 TERR PLANTATION FL	2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	VP McDONALD, GARY 7320 N. 66 TERR TALLY HOOD, FL 33044	3. TITLE ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY	V.P. POLLOCK, LESHE 6031 15th SOUTH W PALM BEACH, FL 33415	4. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFFICER		5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		7. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		8. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFFICER		9. TITLE ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		11. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		12. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
OFFICER		13. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		15. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		16. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing is accurately furnished and is correct, and that the information stated in Section 11 of this form Florida Statutes Chapter 607, that the information included in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if my name had been printed on each page of this report or supplemental report as required by Chapter 607 Florida Statutes, and that my name appears in this report or supplemental report as an officer with an address.

SIGNATURE: *Steve Pollock* *Steve Pollock* 5/20/95 305-792-3200

REMITTED BY MAY 1