

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

PROFIT
CORPORATION
ANNUAL REPORT



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

FILED
May 19 1998 8:00am
Secretary of State

DOCUMENT # K06422 (5)

1. Corporation Name

BERCYN ASSOCIATES, INC.

Principal Place of Business

851 NW 207 ST.
MIAMI FL 33169

Mailing Address

851 NW 207 ST.
MIAMI FL 33169

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

SANKAR ANDREW
851 NW 207TH ST.
MIAMI FL 33169

81 Name

82 Street Address (P.O. Box Number is Not Accepted)

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 to a 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 607.0509, Florida Statutes.

Section 12

12. Officers and Directors

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12
12.1 PD SANKAR, BERESFORD	13.1
12.2 851 N.W. 207 ST.	13.2
12.3 MIAMI FL 33169	13.3
12.4 PD SANKAR, CYNTHIA	13.4
12.5 851 N.W. 207 ST.	13.5
12.6 MIAMI FL 33169	13.6
12.7 D DHANA BEVERLEY	13.7
12.8 851 N.W. 207 ST.	13.8
12.9 MIAMI FL 33169	13.9
12.10 S SANKAR, ANDREW	13.10
12.11 851 NW 207 STREET	13.11
12.12 MIAMI FL 33169	13.12

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or biennial 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 the attached with an address.

SIGNATURE:

A. Sankar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

000002529170
-05/19/98-01055-034
***150.00

SIGN
HERE

4/27/98

CR2E034 (12/95)