FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 AM 5:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K37320** **(4)**

1. Corporate Name
LASER MAINTENANCE SUPPLY, INC.

Principal Place of Business
2420 N.W. 16TH LANE
POMPANO BEACH FL 33064

Mailing Address
2420 N.W. 16TH LANE
POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification: **10/07/1988**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

24 / 25 / 29 / 30

4. FEI Number: **59-1941879** — Applied For / Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has both for-profit and not-for-profit activities under S. 190.038, Florida Statutes. [ ] Yes [X] No

9. Name and Address of Current Registered Agent

ALBERTINE, MICHAEL O.
2400 E. COMMERCIAL BLVD.
SUITE 318
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

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

83

84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 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. Florida, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Sheldon Freistat — 5/1/95

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SHELDON, FRESIDTAT
STREET ADDRESS	2420 NW 16TH LANE
CITY, ST, ZIP	POMPANO BEACH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President	[ ] Change [ ] Addition
12 NAME	Sheldon Freistat	
13 STREET ADDRESS		
14 CITY, ST, ZIP		
21 TITLE		[ ] Change [ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		[ ] Change [ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		[ ] Change [ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing, as voluntarily furnished and does not qualify for the exemption stated in Sec. 119.07(3)(bb), Florida Statutes. Further certify, that if I am an officer or director of the corporation or the officer 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: Sheldon Freistat Pres — 5/1/95 305 972-2100

SIGNATURE AND TYPED OR PRINTED NAME OF MGNING OFFICER OR DIRECTOR

Sheldon Freistat

0100147 CP