

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K49050** (3)

1. Corporation Name
GROUP HOLDING, INC.



Principal Place of Business: **1150 KANE CONCOURSE - 3RD FLOOR BAY HARBOUR ISLAND FL 33154**
Mailing Address: **1150 KANE CONCOURSE - 3RD FLOOR BAY HARBOUR ISLAND FL 33154**

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business					2a. Mailing Address				
State, Apt. #, etc.					State, Apt. #, etc.				
City & State					City & State				
Zip		Country			Zip		Country		

3. Date Incorporated or Qualified	3a. Date of Last Report
11/29/1988	05/01/1995
4. FEIN Number	Applied For Not Applicable
65-0092958	
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

**SF & F REGISTERED AGENTS, INC.
200 SOUTH BISCAYNE BLVD.
SUITE 4310
MIAMI FL 33131**

81	Name
82	Street Address (P.O. Box Numbers Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 612.05(6) and 609.15(2), 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. Thereby, absent the appointment as registered agent, I am firm and certain to accept the office of Secretary of State, Florida Statutes.

SIGNATURE		NAME		ADDRESS		CITY		STATE		ZIP	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12								
TITLE	NAME	TITLE	NAME								
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS								
CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP								
TITLE	NAME	TITLE	NAME								
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS								
CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP								
TITLE	NAME	TITLE	NAME								
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS								
CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP								

14. I, the undersigned, certify that the information supplied on this report is true and correct, and that I am an officer or director of the corporation. The name of the person empowered to file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in paragraph 12(a) and 13(a).

SIGNATURE: *Sandra B. Mathum* **GODY VAINSTEIN** 3/26/96 705-868-6200

CR2E034 (12/95)